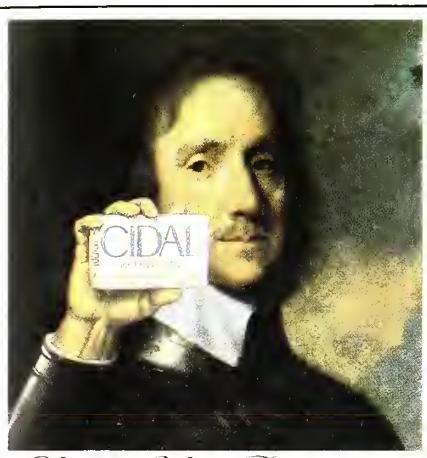


# CHEMIST & DRUGGIST

the newsweekly for pharmacy

April 15, 1989



## Clean Up Britain!

No everybody in this land of ours is prepared to be satisfied with anything less than personal cleanliness. Indeed, a good many are sufficiently puritan to extol fully the benefits of Cidal. But even in matters of personal hygiene, there is a place for the puritan. And if you are sufficiently puritan to extol fully the benefits of Cidal, then you are in the right place.

No soap is more effective than Cidal in banishing dirt from the skin and, as it performs this worthy task, it gently removes - through a special hygiene ingredient - the bacteria that can lead not only to perspiration odour but to skin infection.

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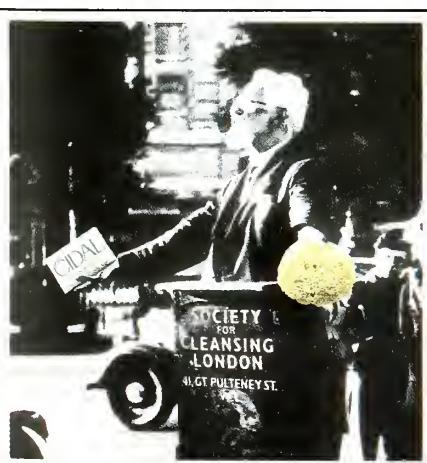
himself, will be lending his considerable (and puritanical) weight to the argument, ably assisted by one of the most committed tub-thumpers we could press-gang into our service.

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## SGM carries Davies motion 371 to 306

## Spectacle sales: Council statement

## Merrills gives a DoH slant on remuneration

## Boots to close Farleys in Devon



## Personal hygiene: turning green

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# COMMENT

**T**he debate on Council's policy on the supervision of dispensing has ended in close defeat for the Society's governing body over whether or not pharmacists should make a final check on each dispensed medicine before it is handed out. The vote at the SGM was clear cut but not overwhelming, expressing additionally "no confidence" in Council after its refusal to include in its model dispensing procedure the final check called for at the annual meeting last year. The question is — what happens next?

RPSGB president Bernard Silverman says Council will consider this development at its next meeting on May 9-10. We believe it should note the SGM decision and then stick to its original policy because of the "balanced" vote. This is not to say that the views of the membership will have been ignored. Council has taken them into account but has consistently managed to damage its standing with members by appearing to be unnecessarily high-handed.

Unfortunately, neither the letters columns of the pharmaceutical Press, votes taken at AGMs or SGMs, nor votes cast in Council elections are an accurate measure of

the views of the membership, because they only represent the opinions of sections of the electorate — and the most vociferous ones at that. However, Council elections are the most representative and give a mandate to those elected to govern the profession. The membership should now allow them to do just that.

When Council announced its model dispensing procedure it was intimated some modification to existing legislation could be required. Mandatory final checking would necessitate it. The Nuffield view that the detailed practice of community pharmacy be governed more by the demands of professional conduct than by statute is one that must be grasped. Council's model procedure leaves the pharmacist to decide whether or not to make that final check on anything but S2 or S3 Controlled Drugs. It expects most will choose to do so but those who do not will not be subject to the sanction of criminal law. The responsibility for errors in dispensing practice remains with the pharmacist. A statutory final check would hog-tie pharmacy without advantage and would demean the profession.



## Davies slams model dispensing procedure

The model dispensing procedure put forward by the Royal Pharmaceutical Society's Council is unnecessary, complex and unprofessional, said John Davies, proposing the motion.

"The whole mish mash can be completely replaced by the simple, safe and wholly



Proposing the motion, John Davies

# 'Final checkers' win the day 371 to 306

**The 'final checkers' carried the day at last Sunday's special general meeting of the Royal Pharmaceutical Society by an unconvincing 371 votes to 306. But even so the vote is a severe setback to Council's attempt to introduce what it sees as a move to allow pharmacists to exercise more liberal, but no less responsible, control over the running of their pharmacies. Council will consider the outcome of the SGM at its next meeting on May 9-10 after which a statement is likely to be issued. The outcome of the meeting is not binding on Council.**

The 700 pharmacists who attended last Sunday's meeting were left in no doubt over Society president Bernard Silverman's attitude to the motion before them. No issue the profession has ever faced has been subject to so much anguish and acrimony, he said. Onlookers cannot and will never understand how the technical detail of whether and when a safety check is precisely made can induce such paranoia.

"Here we are three years after receiving the Nuffield report, still debating what many pharmacists believe to be the most fundamental issue of all. It depends upon one's individual viewpoint to assess what is fundamental, and it would be futile at this stage to attempt to change the opinion of the vast majority. You are far too entrenched for that," he told delegates in his closing speech, appealing to those who "were still prepared to vote through well considered reasoning".

But Mr Silverman's interpretation of the motion was at odds with a section of the

meeting. He saw the motion in two parts: the first expressing no confidence in Council, and the second calling on Council to adopt a policy that the pharmacist need not necessarily be directly involved in the dispensing process, but must mandatorily check each made up prescription. Calls from the floor to "read the motion rather than his interpretation of it" forced him to read the motion through. Those interrupting put across the point that the motion of no confidence in Council was linked only to its response to the AGM motion carried last May.

Mr Silverman called on the meeting to dismiss any side issues, and consider the consequences if the motion was passed. "The real issue is whether your Council is competent to manage the Society's affairs and whether a final check should be mandatory," said Mr Silverman. Of the 24 members of Council 21 were

adamant that the policy was the right one.

Pharmacists possess many

skills: unique is their expertise in the formulation and action of medicines. "Priority should be given to the exercise of those unique skills. We must not justify our right to recognition by making as our priority those tasks which can be performed by others."

"The present law of supervision has not been interpreted as requiring a mandatory final check. The motion calls for such an interpretation — a toughening of the present law and a professional requirement which at the moment does not exist. Don't imagine that the Council can simply state or even demand a mandatory final check without taking measures to enforce law to that effect," said Mr Silverman.

"No other profession would tolerate such an imposition by law and by its professional body. No other profession would have the temerity to even suggest, let alone impose it. It is an insult to a graduate pharmacist, and the stature of pharmacists would be severely compromised by its imposition."

professional recommendation at last year's AGM," he said. (This stated that: "Although the pharmacist, at his discretion, need not be directly involved in the dispensing process, he must in the interest of the patient, check each prescription before it is delivered to the patient, with or without counselling at the pharmacist's discretion.")

In a scathing and sustained attack on the editorial stance of the *Pharmaceutical Journal*, Mr Davies alleged the Editor had "tried his best to confuse the readership by putting his own Council's jaundiced opinion forward". His remarks linking Council with the *Journal* drew Society president Bernard Silverman to comment that the *Journal* was editorially independent and did not necessarily represent the views of Council.

For over two years the Council has attempted to impose its ideas on the supervision of dispensing. Council's efforts have confused pharmacists and it has added insult to injury by treating them as simpletons by repeatedly reiterating that what it proposes is not a relaxation of supervision, but an equally effective form of patient safety, said Mr Davies.

Council's lack of confidence in its ability to win its case has been proved by its refusal to allow the issue to be decided by a postal

**The motion**

*"This meeting has no confidence in the Council of the Royal Pharmaceutical Society over its response to the AGM motion which was carried in May 1988 on the matter of the pharmacist making a final check of each made up prescription before it is delivered to the patient."*

ballot. "Nowhere has the Council received wholehearted support, yet it has decided it is going to lead a divided membership along its path. I have no confidence in that sort of leadership," he said.

The only way of resolving the dilemma had been to call an SGM.

This had become inevitable once it became clear that a final check had not been introduced into the model dispensing procedure published earlier this year. With the exception of S2 and S3 drugs, a blind pharmacist could carry out the supervision on the majority of prescriptions so frail are the supervisory provisions, said Mr Davies.

"It is patently obvious that what is being said about supervision not being relaxed is a falsehood of gigantic proportions. A pharmacist may certainly authorise a prescription to be dispensed, but then to say he has supervised the dispensing of it when he has no further dealings with it is a nonsense," he said.

**A policy of drift and shift...**

Alan Rogers, in seconding the motion, accused the Council of a "policy of drift and shift over the past few years, and in it evidence to the Nuffield Inquiry."

The Nuffield Report in 1986 contained conflicting statements, he went on. It acknowledged that checking a script and ensuring the patient understood how to use the medicine had increased in complexity, and required a pharmacist's experience.

In contrast it asked whether a pharmacist's continuous presence

during the dispensing process.

These proposals were rejected by two thirds of local branches and have been consistently criticised. The LPC conference called for the retention of the present supervision requirements and the AGM backed a final check, said Mr Rogers.

In August 1988 Council published its conclusions. "Long serving Council members and newcomers alike rushed to endorse this new policy. Only Ashwin Tanna, John Myers and Graham Walker heeded the wishes of the membership," said Mr Rogers.

Council has never offered any good reason for this fundamental change in practice, he said. He took issue with the Council's viewpoint that it is the pharmacist's professional right to organise practice within a pharmacy subject to compliance with the broad framework of the

law and the code of ethics. law is impinging more, rather than the law is impinging more rather less on the conduct of professions? Is there not a need for more stringent checking?" he asked. Council has failed to acknowledge the overwhelming opposition from practising pharmacists. It has failed to understand they a

"If only it were that simple. Has Council not heard of patients' rights, has it not noticed that the law is impinging more, rather than less on the conduct of professions? Is there not a need for more stringent checking?" he asked. Council has failed to acknowledge the overwhelming opposition from practising pharmacists. It has failed to understand they are firmly committed to the extended role. It has displayed a lack of communication, comprehension, consistency and perhaps a lack of competence, he concluded.



Members wait on the front row for a chance to speak

**A message from the Privy Councillors...**

A message from the three Privy Council members of the Society's Council was read out by the President, but not without opposition from the floor.

Mr Silverman's first attempt to read the statement was shouted down by delegates. It was only after the immediate past president Professor Geoff Booth condemned their behaviour, followed by a plea from the proposer of the motion, John Davies that Mr Silverman read the message from Christine Puxon, Lord Peston of Mile End and Dr John Evans:-

"We ourselves are not pharmacists, but we are closely involved with the profession and committed to its interests.

"Firstly it is our opinion that the Council's proposal on the supervision of dispensing is based

on deep consideration of every aspect of the issue. The merits of this and of alternative options have been well studied and debated at length. In addition, the views of the members of the Society have been considered carefully.

"Secondly, we believe that the Council's proposal is well and soundly judged, and in the best interests of the profession. We support the view that the profession must adapt and grow in professional autonomy if it is to have a secure future. The public too has an interest in the development of the profession: that public interest is met by allowing those pharmacists who wish to do so to extend their exercise of professional discretion without diminishing the traditional responsibility of the profession on which the public rightly relies."

**From the floor...**

The Young Pharmacists Group overwhelmingly supports Council's proposals, said YPG chairman Robert Carroll (Durham). "The motion of no confidence must be rejected. There would be alarming repercussions," he warned. "What sort of message will it send to other professions and the Government? Pharmacy must



YPG chairman Robert Carroll

achieve its differential advantage, something it can do better than others. We cannot exploit the opportunities to the full if we support this motion."

The proposed new dispensing procedure was not mandatory, the opportunity to intervene was preserved, the pharmacist still carried total responsibility. There was no contradiction in Council's approach, he said.

Support for the motion would deny pharmacists the right to organise professional practice within their pharmacy; it would deny the opportunity to exercise the advisory role to the full; it would make the extended role impossible, and put the profession back a decade, Mr Carroll argued.

Council candidate John Donoghue (Liverpool) described the model dispensing procedure as ill conceived and unnecessary.

"We do not need such a convoluted scheme," he said. A compulsory final check is equally unnecessary. Neither of these recognise our professional status. Both are patronising and overly restrictive."

Pharmacists already have the authority to organise their work practices, and Council was showing them an appalling lack of respect. The final check was a reaction to the inadequacies of Council policy and its refusal to listen to any opinion but its own, Mr Donoghue argued. "The last thing we need is a no confidence vote. Council should withdraw its model dispensing procedure

*continued overleaf*



Alan Rogers, seconding

was essential to the proper conduct of a pharmacy and noted the dispensing of many prescriptions could be shown after the event not to have required the personal attention of a pharmacist.

In July 1987 Council published its consultative document dismissing Nuffield's proposals for changes in the system of personal control, but stating a need to redefine supervision procedures, so that pharmacists should see most prescriptions at some stage



*Council candidate John Donoghue  
continued from p609*

to allow fresh ideas to be introduced, and in so doing remove the reason the motion was proposed."

Roger Mills (Slough) feared the model dispensing scheme would allow irresponsible pharmacists to abrogate their responsibilities. "It will be used by the Government to our disadvantage once we have admitted that part of the dispensing process does not require professional involvement. The membership feel their livelihood is protected by the need for their professional presence," he said.

But Mr Mills warned Mr Davies that he did not believe that the membership wished a final check to be made mandatory. He said he would vote for the motion because it was the only way of preventing Council forcing through a procedure which he felt could destroy the profession.

Change is not always popular but no profession can stand still, said Council member Dr Alison Blenkinsopp. She urged the meeting to opt for the Council policy "because that will be decided is not how pharmacy might be practised next month, but the philosophy that will govern practice into the next century."

Within two years it is predicted over 80 per cent of GPs will be issuing computer-generated prescriptions. Appropriate use of such technology will result in an enhanced public service provided pharmacists are not hidebound by detailed regulations. The motion should be opposed, she said.

Council candidate Alan Smith was another who supported the motion only reluctantly. The only urgent recommendation made in the Nuffield Report had been to remedy the "manifest deficiencies of the current present remuneration system," he said. Any profession proposing to give up a statutory protection for nothing in return is foolhardy beyond belief, he said, intimating one could have been traded off against the other.

Council admits the proposed new procedures will have minimal effect. Why risk amending primary legislation when all that is

required is secondary legislation to delete the word "direct" in the NHS regulations, asked Mr Smith. Primary legislation would give every opponent of pharmacy a chance to erode the profession's position.

He asked Council to withdraw its model procedure and have another think about it. "I am not against the general premise, but Council should take more cognizance of the dangers that it puts the profession in Parliament," he said.

"No one could disagree with Council's model procedure in its entirety," said Council member Ashwin Tanna. "Council's proposals, which would require the replacement of section 52(c) of the Medicines Act with only a professional requirement and no final check criteria would impair the safety and quality of service of the patient, he said.

If pharmacists desert the basic supply function they desert the bedrock of the profession, said Mr Tanna. "The change, as envisaged by the Council, is playing into the Government's hand. Do you really believe the Department will continue to pay us for dispensing prescriptions when the services of a pharmacist are, by our own admission, no longer required?"

Immediate past president Geoff Booth said everyone had heard the points rehearsed *ad nauseam* — every single one had been discussed by Council.

"The final check is not mandatory now and yet there is no



*Council member Ashwin Tanna*

evidence of catastrophe," he said. "Nobody is suggesting there shouldn't be a final check. There is no Machiavellian intent in the mind of Council, and to suggest that Council has ignored the members' views is incredible."

Pharmacists were living in cloud cuckoo land if they thought the present system would stay as it is with the advent of extensive use of computers by GPs, he warned. "It will revolutionise the system as you know it is a very short time." In attempting to extend pharmacists' professional choice and responsibilities Council has expressed total confidence in the membership.

## NHS reform 'not in tablets of stone'

Health Minister David Mellor has gone on record for the second time this week to say that the Government's planned NHS reforms are "not set down on tablets of stone."

Mr Mellor stressed that the main aim of the reforms was to introduce consistency of care throughout the service, particularly at general practice level. Speaking at a debate on primary health care organised by the ABPI this week Mr Mellor said Government wanted to stimulate GPs to make new initiatives in their practices.

The medical profession had made too much of practice budgets which were voluntary and could only be taken up by large

practices, he said. Nor did he think patients would "rise up in horror" over indicative drug budgets.

Chairman of the General Medical Services Committees Dr Michael Wilson listed improvements in services sought by the profession before the White Paper which were still unfulfilled. He said GPs wanted more information to enable more effective prescribing but: "We have not sought drug budgets to create a downward pressure on expenditure. We have not sought sanctions or fines on GPs if they do not respond. We did not seek a system of budgets which offer an incentive to GPs to economise on the care they can provide for their patients."

## University teachers dispute worries students

With the finals just around the corner, third year university students are worried about the possible repercussions of industrial action by the Association of University Teachers.

Past president Dai John told guests at the BPSA dinner last week to be as positive in their outlook as possible.

BPSA has had discussions with the Society about what would happen with preregistration training if students could not sit exams or papers were not marked, David Tait, BPSA president told C&D. Council are to discuss the matter at their May meeting, when the outcome of the AUT ballot will be known.

"Council will not be able to make any positive decision concerning the 1989/90 preregistration year until after the AUT ballot in mid-April and the

consequent decision by the Association. Every effort will be made to ensure that the arrangements for preregistration experience do proceed." Raymond Dickinson, RPSCB deputy secretary told C&D.

## Five down

The number of registered pharmacy premises in Great Britain fell by five in March with 18 openings and 23 closures.

In England there was a net loss of two businesses with the 15 closing down not quite balanced by the 13 opening up. In London there were two openings and three closures. Scotland saw no change with three new businesses levelled against three closures, while in Wales two businesses closed.

## MAFF to amend PML?

The Ministry of Agriculture Fisheries and Food is asking for comments on proposed changes to the Medicines (Veterinary Drugs) (Merchant's List) Order.

The new Order would consolidate and repeal the Medicines (Exemptions from the Restrictions on the Retail Sale or Supply of Veterinary Drugs) Order 1985, as amended (the so-called "PML Order"). Changes

include a proposal for a new provision to allow PML status to be conferred by administrative action for up to one year before receiving Parliamentary approval.

Comments on the proposals should be sent by 5 May to Mr S. Smyth, Room 108, Veterinary Medicines Directorate, Central Veterinary Laboratories, New Haw, Weybridge, Surrey KT15 3NB.

# NPA's mixed feelings on NHS review

The National Pharmaceutical Association's Board has mixed feelings about future dispensing remuneration under the NHS review. At its March meeting, some members were encouraged by the view that GPs would be discouraged from prescribing more than four weeks supply and others were only too conscious of the pressures on ingredient costs.

Bob Worby and Marshall Gellman were optimistic that pressures on doctor's budgets would discourage the prescribing of more than four weeks supply, which would be in the pharmacist's interest, both from the saving in stock and the increase in items dispensed.

The pessimists — Messrs Priest, O'Rourke and Sharpe, felt that remuneration would suffer with the abolition of "cost-plus" and the reduction of net ingredient cost and prescription numbers, due to the financial pressures.

**FPC workload** Mr Taylor was concerned that if FPCs were to become smaller, the increased workload demand upon the only pharmacist on the committee would be too great. It would help if deputies were permitted.

The Board agreed that other representative bodies should be approached and that collectively representations then be made to the Secretary of State requesting the appointment of deputy members.

**NPA backs member** The Board agreed unanimously to meet the legal costs for Mr R.J. Patel in his battle to open a pharmacy in Writtle, Essex, following the FPC's approval of his application for an NHS contract. Mr Patel faced fierce opposition from the local dispensing doctors who were seeking a judicial review of a decision to turn down their earlier appeal against approval of the contract.

**The pharmacy flag** Mr Tim Astill, director, reported upon his recent broadcast on Radio 4's "You and Yours", with Dr David Roberts, chairman Dispensing Doctors Association, about who should be doing the dispensing in Hatfield Peverel.

He had also responded to a letter in the *Times* which accused pharmacists of "shameless profiteering" when dispensing private prescriptions.

**Assitant training programme** Mrs Benson, head of training, reported that the pilot training programme for the medicines counter assistants had been most successful. All four courses (in

Glasgow, Leeds, Cardiff and Sunderland) had been over-subscribed and she was confident that the national launch would be successful. The Board acknowledged the financial assistance from Merrell Dow.

**The sale of reading glasses** The Board agreed that an information leaflet should be prepared explaining the recent changes in legislation.

**Medical video cassettes** The views of the members of the Business Services Committee on the first of a new series of medical video cassettes intended for sale, or rental, to the public through community pharmacies would be conveyed to the producer.

**Society's Benevolent Fund** The sales of the NPA's first Christmas card resulted in a surplus of £1,276 which would be donated to the RPSGB Benevolent Fund.

**Light-duty photocopier** The committee agreed the terms of an NPA Services promotion to members of a new Silver Reed light-duty photocopier.

**Service recognition** In recognition of nine years service Alan Facer (North East England), Mike Thornton (chairman) and David Thomas (West Midlands) were presented with NPA pestles and mortars by Thos O'Rourke (Northern Ireland) the Board's longest serving member. Outgoing chairman Mr Thornton was also presented with his past NPA chairman's badge by Roy Jones (vice-chairman).

Bernard Brown (Scotland), Mike Thornton and John Wilford (South East England) who were attending their last board meeting were thanked by Mr Astill.

## MCA costs industry £5m

Costs amounting to £5m a year will fall on the pharmaceutical industry under new arrangements for financing the administration of licences for medical products for human use.

Roger Freeman, Under Secretary of Health, told the Commons that the new licence payments will be able to be set against profits under the Pharmaceutical Price Regulation Scheme. The Minister gave an assurance that it would not be a case of "piper calling the tune" and said ministers determined the level of fees and controlled the new licensing agency.

## Sales of reading spectacles from pharmacies

A new exemption from the provision of the Opticians Act 1958 came into force on April 1, 1989. Under this exemption the prescription of an optician or general medical practitioner is no longer required for certain "excluded sales", best described as sales of reading glasses or spectacles for presbyopia. Supervision of the supply of reading glasses by a registered optician or registered medical practitioner is no longer necessary, subject to compliance with the following:

- (i) The spectacles must have two single vision lenses of the same positive power, which must not exceed 4 dioptres.
- (ii) The sale must be wholly for the purpose of correcting, remedying or relieving the condition known as presbyopia.
- (iii) Sales must not be made to any person under 16 years of age.

This new exemption adds to the Sale of Optical Appliances order, passed in 1984, under which two further conditions apply:

- (iv) No spectacles can be sold which include celluloid or cellulose nitrate in their manufacture and all spectacles must comply to the relevant British Standard.
- (v) The supplier should ensure that spectacles comply with the conditions relating to safety, serviceability and optical performance. The patient has a right to redress if the spectacles are unsatisfactory.

Apart from reading glasses, all other spectacles may be supplied only in accordance with a prescription written by a registered optician or general medical practitioner. There are additional restrictions and special conditions relating to the supply of complex spectacles such as those with astigmatic lenses and those with bifocal or multifocal lenses and the supply of contact lenses and low vision aids.

Pharmacists wishing to sell or supply spectacles must comply strictly with the relevant sections of the legislation. It should also be borne in mind that activities associated with the fitting and sale of spectacles must not take place in the dispensary since it would be inappropriate, for security reasons, to allow public access to the dispensary area. Ideally, a separate room or area should be set aside for such activities.

**This statement replaces the statement on the sale of spectacles published in the *Pharmaceutical Journal* on February 16, 1985, which is withdrawn.**

## White Paper: lack of detail

The Guild of Hospital Pharmacists is "disappointed" with the lack of detail in the working documents to the NHS White Paper.

Professional secretary Arthur Williams says the Guild is in broad agreement with the concerns expressed by other professional groups within the NHS. Like the doctors and nurses, the Guild regrets that the papers were produced with no opportunity for professional groups to submit evidence. "We are surprised there have been no pilot studies to test the validity of the proposals, and the timescale given for responses is very short," Mr Williams told *C&D*.

"We share the concern of our colleagues that becoming more involved in management may reduce time spent on clinical care." The Guild stands by its earlier view that what is wrong

with the NHS is a "fundamental underfunding", Mr Williams said. "We should not be looking for change for the sake of it; we should be looking for more resources."

The idea of self-governing hospitals presented problems for support services, which in some areas — production, QC, drug information — are arranged across areas. The role of pay bargaining is unclear.

The White Paper did, however, signal areas of opportunity. Mr Williams said the Guild welcomed moves towards indicative prescribing budgets for GPs. "Hospital pharmacists have great expertise gained over 20 to 30 years, in controlling drug costs and we could make that expertise available in the community, working with our retail colleagues," he said.

## Employ more pharmacists plea

Pharmaceutical companies who do not employ pre-registration pharmacists are being urged to reconsider their position by the Royal Pharmaceutical Society's Industrial Pharmacists Group.

The Group says there has been an increase in the number of places provided over the past few years, with 63 (excluding Bradford sandwich students) in 1988. However, some large companies are not taking students, and, says the Group, are contributing to the shortage of pharmacists in the industry.

"Previous experience has shown that one of the best methods of influencing students to take up a career in industry is to provide pre-registration training," the Group says.

The Industrial Pharmacists Group Committee plans to meet representatives from some companies not employing pre-regs to discuss provision of more places.

In a list of 69 prereg places available between October 1988 and March this year, one company, Glaxo, stands out above the rest, employing 13 students. Baxter Health Care, Beecham Pharmaceuticals, Eli Lilly and Fisons employ four students each.

## Part VIII changes

The Pharmaceutical Services Negotiating Committee says that due to the late notification to contractors of 32 additions to Part VIII of the Drug Tariff, it has agreed with the Department a postponement until May 1.

PSNC is reminding pharmacists that endorsements against orders for these items will be required so correct payment can be made.

**Boehringer Ingelheim** say the 1989 Drug Interaction Alert is now available. The summary of currently recognised and possible interactions, compiled by Dr Ivan Stockley of the University of Nottingham, is available as a pocket sized folder and as a wall chart, free of charge, from the field services department, *Boehringer Ingelheim Ltd. Tel: 0344 424600*.

**Proctor & Gamble** say to ignore their price changes appearing in this week's *Price Supplement*.

# TOPICAL REFLECTIONS

by Xrayser

## The bad news

It was my hope — forlorn I know — that Council would actually hear what the bulk of the members of the Society at the special general meeting were trying to say. It was my hope that having heard they would have withdrawn the proposition that will mean the introduction of certificated dispensing assistants. It was even my hope they might go to the extreme of checking with RPSGB Legal Department as to whether my statement that we already have the powers of considerable discretion within our professional responsibilities to undertake much of the wider roles they advocate.

Instead, everyone was dismayed at the obdurate refusal of the chair to reconsider withdrawal of the proposition which so concerns us, despite requests from eminent and experienced people such as Alan Smith, John Davies, as well as the young John Donoghue. In the end, having attempted to make two issues from the one we all understood, Mr Silverman put the motion to the vote. It was a matter of sincere regret that it had to come to it, but as you know the vote of no confidence was carried.

A precipitating factor was the assertion that if carried, the motion of no-confidence would require prime legislation to make a final check law. This I think is wrong. From my reading of the whole of Nuffield, there is no requirement for us or Council or the Society to do anything at all about changing the law. All we were being asked to do was to look at supervision. I think we have done that. And we don't want the situation changed. I would ask please, that members contact our Legal Department to confirm that what I said about our existing discretionary powers is true. Clearly attempts to apply for legislation will have to be blocked. Clearly there will have to be new members of Council after the elections...



## Nice lice?

The National Pharmaceutical Association has begun a new programme. Contrary to the seditious rumour it is not, I repeat, it is not a "Be nice to lice" week. Oh, contraire! It is a "stop the louse" campaign.

I threw that little bit of french in in case there were any French lice listening. It wouldn't do any harm at all, though, if we were all to look out the publicity material, and use it.

Remembering the statement "Only dirty people wash", I wonder if it would be any help in the campaign, but think not. However, we all know the distress shown by people patently clean in habit, who find they have lice. Our help and reassurance is valued. It's another facet of pharmacists' work.

## Hydrocortisone cream

Obviously the dozen or so manufacturers who rushed in to woo us with offers that couldn't be refused when OTC sales became possible are licking their wounds. Ruefully looking at £2m sales, instead of the £5m they confidently expected.

It's our fault chaps. We took the warning on the label too seriously it would appear. While privately we may have had our doubts, the directions do say "not to be used in the face or near eyes", don't they?

Our friends Crookes, anxious only to improve our confidence in counter prescribing hydrocortisone cream, last week contributed to a seminar on its use, which I must say I found useful. I think there is a case for us to reappraise our counter prescribing practices, which might well bring wider sales of the cream to the real benefit of our patients.



*who cares?*



*we care*



Galenco, the Belgian skincare specialists have created the Gentle Care bath range

Like all Galenco skincare preparations, Gentle Care has been formulated by dermatologists, specifically for dry and sensitive skins.

Natural Palm oils, moisturisers and conditioners blend to deep cleanse and nourish your skin.

Use Gentle Care by Galenco and show your skin you really care.



*Gentle Care*  
by  
GALENCO

National Advertising Campaign.

# STRONG SALES FROM GENTLE PRODUCTS

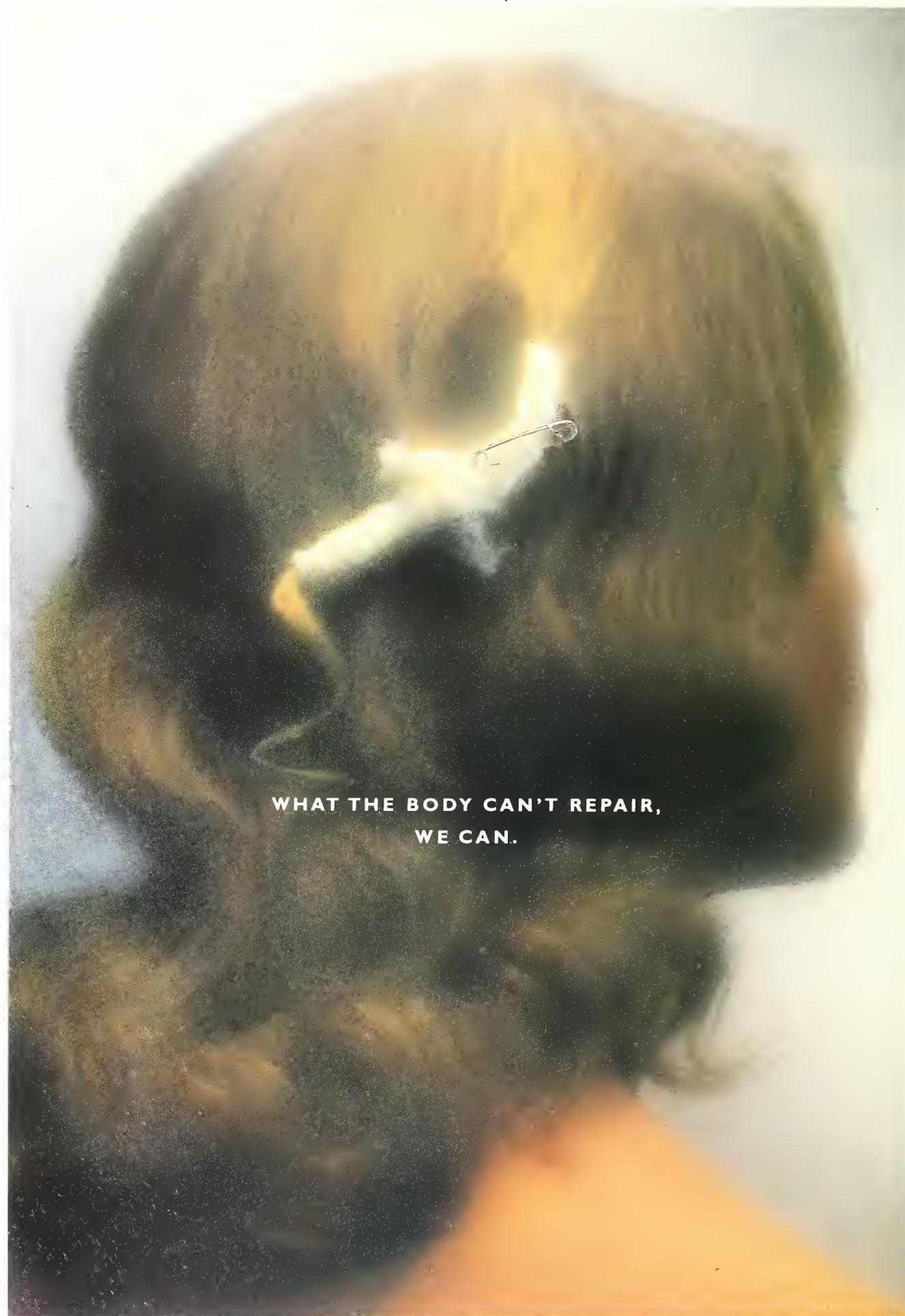
Gentle Care by Galenco is one of the fastest growing and most profitable toiletry lines in a buoyant market; specifically appealing to those with dry and sensitive skins.

Formulated by dermatologists, Galenco products are manufactured under pharmacy control without testing on animals.

With attractive new packaging Gentle Care will be supported throughout 1989 by a major national advertising campaign in Women's magazines.

Stock Gentle Care by Galenco and show your customers you really care. Galenco Ltd., Trowbridge, Wiltshire BA14 8TX. Tel: 0225 768381.

MAKERS OF FINE SKINCARE AND BATHING PRODUCTS



WHAT THE BODY CAN'T REPAIR,  
WE CAN.

You prescribe remedies to help the body overcome all sorts of ailments. From the common cold to the not so common illness.

But when it comes to dry or damaged hair, the body is left powerless.

Why? Because basically hair is dead. The only living part is the root.

So any damage done through hair dryers, perms or styling tools, needs help from outside the body.

That's why Schwarzkopf are launching a new concept in hair care; the Gliss Corimist Hair Repair Programme.

It works rather like a skin care regime.

All the products in the



range are carefully formulated, not just to work in isolation, but together as a complete programme - repairing, cleansing, caring and styling.

At each stage the programme works on the structure of the hair, helping it to look as healthy as nature intended.

And it's not just the Schwarzkopf laboratories who've been working on the Gliss Corimist formula for success.

A £3.5 million advertising campaign is pushing the launch in national press and women's magazines.

So you can expect lots of bodies coming through your door for help.

**GLISS  
CORIMIST**  
THE HAIR REPAIR PROGRAMME.

# the perfect partners

Lady Jayne

Lady Jayne



# Lady Jayne



Laughton & Sons Ltd, Warstock Road, Birmingham B14

# Final check for Council?

In summing up at last Sunday's SGM, the president, Mr Silverman, indicated that should the motion be passed it would necessarily lead to a mandatory final check. This is not as I understand it. All it means to me is that the considerations of Council which have led to the gigantic turmoil, are at a simple end.

A speaker from the platform said that state of the art computerisation and future developments would lead to a greatly amended way of prescribing. This is quite correct. It will, however, mean more than just "counting and pouring"! Future drugs will be more potent. These facts, combined with suspect medical software and the ability for the prescriber to press the wrong button together with our enhanced role, will lead us to have to provide an increased qualified pharmaceutical input to safeguard and advise the patient.

All it took was the thoughts of grass roots pharmacists, through the good leadership of John Davies, to put a little common sense into the arguments. Thank

you, John. The shame is the Council appeared not to want to listen!

Point 16 of Nuffield is: "The Society should give careful and earnest consideration to the degree of supervision needed in the dispensing of prescriptions." We have. The Council need not be ashamed. It has not failed. Its herculean efforts to find a "solution" in consideration Nuffield is more than was requested.

The conclusion is that it appears that the law is adequate as it is. Professional guidance, however, will still be required.

I look forward to the next round of good debate.

**M.A. Reynolds**  
Highcliffe, Dorset

## Policy home to roost?

The result of the special general meeting does not surprise any of our membership. The Council's policy of ignoring opposing views has finally come home to roost.

The only honourable way left

for the Council is that suggested by Xrayser. The Council should withdraw the guidance document and amend the guidance, so that instead of the pharmacist making a check "at some stage in dispensing process", he should make the check "at a final stage".

The Nuffield report must be accepted in its entirety, "warts and all." The Council must as a matter of urgency gain the confidence of the majority of members. The Nuffield recommendation on remuneration may point the way for a solution. According to Nuffield the present structure of remuneration acts as a "serious handicap to development" instead of acting as "a powerful force for change". Loading of the major part of remuneration on the number of prescriptions dispensed is also regarded as a thoroughly retrograde step.

The sincerity of DoH in implementing its side of bargain is well known — we all have bitter experiences. It is now up to the Council and our negotiators to remove this serious handicap in remuneration first before the membership can trust the DoH.

**Jayanti Patel**  
Secretary, British Pharmacists Association

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ZYMA (UK), FREEPOST, ALDERLEY EDGE SK9 7YB or phone (0625) 584788 (Reverse Charge Call)

## Vote tactically

This is an appeal to all 10,000 members of the Royal Pharmaceutical Society who represent independent pharmacies to use their vote in the forthcoming Council elections. Each of the 10,000 should vote for the seven candidates who are independent proprietors, or who have already voted in Council for the 'final check'.

The issues involved go much further than the single question of supervision. They are:-

1. The supply of second pharmacists and certificated assistants needed to fulfil the requirements of future legislation are unlikely to be available. Those who are available are likely to be employed by the 20 per cent of pharmacies which issue more than 6,650 prescriptions a month.
2. In rural areas establishment of new pharmacies, or enlargement of existing ones, is restricted by the Clothier legislation. This conflicts directly with the Nuffield recommendations that pharmacies should be established in areas of greatest need.
3. An increase in pharmacy

numbers in these areas can improve service to all patients. It is calculated that it will save the NHS £100m in the estimated uncollected profits of dispensing doctors.

4. It will enable pharmacists to provide the increased advisory role recommended by Nuffield.

K. Jenkins  
Wendover

## Personalising health advice

I was interested to read in *Chemist & Druggist* (April 8) that the Health Secretary is to provide £250,000 a year to fund leaflets in pharmacies. I have distributed health information leaflets for some years and the patients do appreciate this free service.

Pharmacists, however, are not primarily health educators. Their primary role is to dispense and offer advice on medicines. This is why we have developed a pharmacy computer system that automatically produces A4 leaflets, which tells the patient the purpose of the medicine, how it

should be used, and advises on the side effects.

Patients appreciate this advice, and begin to have a greater understanding of the pharmacist's role as the expert on drugs.

Mike Hadley  
Mike Hadley Ltd

## Vestrin live up to motto

I rarely write to the Press but feel that I must commend the Edinburgh branch of Vestrin for a splendid effort in assisting a patient on our recent local public holiday.

A young child on holiday had left her insulin behind. The insulin was a type not normally used in this area and the child's mother had contacted every duty pharmacy with no success. I, in turn, contacted Vestrin to inquire if a van might be passing through our area or if a supply might be sent by bus or train to be collected.

The response was immediate — a special delivery was arranged by van which necessitated a round trip of 130 miles. I was quite overwhelmed by this level of service, which was given without hesitation, and imagine the relief of the mother when I delivered the insulin. We all know Vestrin's motto, and on this occasion they most certainly lived up to it.

R.P. Marr  
Dundee

## Long time CFC-free!

I was delighted to read of X-rayer's acknowledgement of the phasing out of CFC aerosol propellants by some of the major toiletries companies. You may be interested to note that Osmond Aerosols were using carbon dioxide over ten years ago.

Until recently there has been little demand for carbon dioxide or nitrogen but environmental concerns have re-awakened interest in this type of aerosol. Some of our customers have used compressed gasses for some time.

S.A. Howell  
Marketing manager,  
Osmond Aerosols

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YOUR MONEY WILL BE REFUNDED IN FULL IF THE STARTER PACK IS RETURNED WITHIN 28 DAYS

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IT'S  
OFFICIAL.

# All slow-release aminophyllines/theophyllines are not the same.

“It is therefore essential that patients taking a sustained-release, oral theophylline preparation who have been stabilized on a particular brand continue to receive the same product.”

Advice from the Council of the Royal Pharmaceutical Society, The Pharmaceutical Journal, July 11, 1987

## Don't risk patient control.

When the prescription says:

*Rx aminophylline SR 225mg.*

Check with the doctor; does he mean:

# Phyllocontin®

CONTINUS® Tablets aminophylline hydrate BP.

**Prescribing Information:**

**Uses:** Treatment and prophylaxis of bronchospasm associated with asthma, emphysema and chronic bronchitis; also cardiac asthma and left ventricular or congestive cardiac failure. **Dosage and Administration:** Adults: 2 tablets twice a day, taken morning and evening following an initial week of therapy on 1 tablet twice daily. Each tablet contains aminophylline 225mg. Since patients vary in their response to xanthines, the dosage must be titrated individually, and if maximum response is not achieved, the theophyllin plasma level should be measured. **Transferability:** It is not possible to ensure bioequivalence between different sustained release theophylline products. Therefore it should be emphasised that patients, once titrated to an effective dose, should not

be changed from PHYLLOCONTIN CONTINUS tablet preparations to other slow or sustained release xanthine preparations without reiteration and clinical assessment. **Warnings:** The following agents increase clearance: phenytoin, carbamazepine, rifampicin, sulphapyrazone, barbiturates, smoking and alcohol consumption. The following agents decrease clearance: allopurinol, cimetidine, erythromycin, thiabendazole, isoprenaline, oral contraceptives, viral infections, liver disease and heart failure. Influenza vaccine may potentiate theophylline. A reduction of dosage may also be necessary in the elderly. The following should be used with caution: halothane, iomustine and lithium. Although theophylline crosses the placental barrier, it has been used during pregnancy without attributable

**adverse effects / Side effects:** The risk of side effects usually associated with aminophylline and xanthine derivatives such as nausea, gastric irritation, headache, palpitations and CNS stimulation is reduced. Basic NHS Cost: 23.5p per day (ex 1000 pack, 2 b.d.) PL0337/0026.

This product is protected by British Patent No. 1405088

® PHYLLOCONTIN and CONTINUS are registered trade marks

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The Science Park, Cambridge, CB4 4GW  
Member of the Napp Pharmaceutical Group

**NAPP**



ANOTHER CONTINUS CLASSIC

# SCRIPT SPECIALS

## New Opticrom eyedrops

A viscous formulation of Opticrom eye drops, enabling twice, instead of four times daily administration, is to be available from May 2.

New Opticrom eye drops (5ml £5.89 trade) comes as a clear colourless to pale yellow sterile solution of sodium cromoglycate 2 per cent with hypromellose 0.975 per cent to give viscosity.

Fisons say that the existing presentation (13.5ml) for four times daily administration will remain available as Opticrom Aqueous for patients who prefer it. From May 2 prescriptions for Opticrom eye drops should be filled with the new presentation. The product licence number is 0113/1332. *Fisons plc pharmaceutical division. Tel: 0509 611001.*

## Intal changes

From May 2, Fisons are discontinuing Intal 1mg inhaler and only the 5mg, 112 dose inhaler will be available.

Fisons say that patients will benefit from the increased efficacy provided by the higher strength. The dose is also more convenient to administer being one 5mg puff, four times a day.

Prescriptions for Intal should be met with Intal 5 until stocks of the "new" inhaler are available. The price remains unchanged. *Fisons plc pharmaceutical division. Tel: 0509 611611.*

## New Tolectin

Cilag have introduced a new strength Tolectin which will replace the 400mg DS preparation.

It contains 200mg tolmetin sodium (90 £14.95 trade) and will be available from the end of April. The dose is 600mg of this nonsteroidal anti-inflammatory drug 1800mg daily in divided doses. *Cilag Ltd. Tel: 024024 3541.*

## Preferid cream

Brocades have introduced a topical formulation of budesonide for severe eczema and psoriasis. Preferid contains a potent, non-halogenated steroid which, says the company has a favourable therapeutic ratio.

**Manufacturer** Brocades Great Britain Ltd, Brocades House, Pyrford Road, West Byfleet, Surrey KT14 6RA

**Description** Preferid cream contains Budesonide 0.025 per cent w/w in a cream base of white soft paraffin, liquid paraffin, cetostearyl alcohol, cetomacrogol 1000, sorbic acid, citric acid, sodium citrate and purified water. Preferid ointment contains budesonide 0.025 per cent in an ointment base of propylene glycol, white beeswax, liquid paraffin and white soft paraffin.

**Uses** Treatment of eczema and dermatitis of all types, psoriasis of the scalp, chronic plaque psoriasis of the palms and soles and other forms of psoriasis (excluding

widespread plaque psoriasis).

**Administration** Apply a small quantity to the affected part two or three times daily. Application may be made under occlusion in more resistant lesions.

**Contraindications, warnings etc** Bacterial, viral and fungal infections, facial rosea, acne vulgaris, perioral dermatitis, perianal and genital pruritis and nappy rash. Local and systemic toxicity with topical corticosteroids is common, especially followed prolonged use on damaged skin. If used in childhood or on the face, should be limited to five days and occlusion should not be used. Inadequate evidence of safety in human pregnancy. Long term continuous therapy should be avoided.

**Supply restrictions** POM  
**Packs** Both cream and ointment come in tubes of 30g (£2.96) and 100 (£9.06)

**Product licences** Cream 0166/0123; ointment 0166/0122

## BRIEFS

**Mianserin tablets** are now available from Cox in 10mg (£6.54), 20mg (£13.07) and 30mg (£19.61, all prices trade) strengths. All come in packs of 100 and are marked "Msn10", "Msn20" and "Msn30" respectively on one face with a twin triangle logo or the other. *Cox Pharmaceutical Ltd. Tel: 0271 75001.*

**International Medication Systems** say that Min-I-Jet adrenaline 1:1000 0.5mg, 0.5ml (1072) is now back in stock. Distributors, *Gee Generics. Tel: 04203 87501.*

**Omnikan** U100 insulin syringe 0.5ml and 1ml, are now available from Cox. Both sizes cost £1.20 trade, per 100. *Co. Pharmaceuticals Ltd. Tel: 0271 75001.*

**Yutopar** 10mg tablets are to be marked "177" on one side and "Duphar" on the reverse, from batch 039425, say *Duphar Laboratories Ltd. Tel: 070 472281.*

**Milupa** say that delay in the availability of Milupa 1pd (C&I last week) means the product will not now be available until May 20. *Milupa Ltd. Tel: 01-573 9966.*

**Evans** say all standard injections will be produced in packs of 10 instead of five when current stocks are exhausted. Packs now available in 10s are: atropine sulphate 400 microgram (1ml £3.74), heparin calcium 5000 unit (0.2ml £6.80) and magnesium sulphate 50 per cent (2ml £12.40, all prices trade). *Evans Medical Ltd. Tel: 0582 608308.*

**CP Pharmaceuticals** are extending their range of "professionals' generics" with the following: atenolol 50mg (£4.75) and 100mg (£6.72, both 28s) and tamoxifen 10mg (£6.55) and 20mg (£9.56, both 30s, all prices trade). *C. Pharmaceuticals. Tel: 0976 61261.*

**Salbutamol** inhaler is still available from 3M Riker. The syrup has been discontinued not the inhaler, as announced in the British National Formulary (No. 17 March 1989). *3M Riker. Tel: 0509 611611.*

**Owen Mumford** have introduced new packs of platforms for Autolet F normal (10 £0.50) and extra depth (10 £0.50). *Owen Mumford Ltd. Medical Division. Tel: 0998 812021.*

## Janssen launch Prepulsid

A prokinetic agent for treatment of disturbed gastric motility has been launched by Janssen.

Prepulsid stimulates motility in the lower oesophagus, gastric region, small intestine and colon. It is believed to act by enhancing acetylcholine release from the intestinal wall. Initially, it will only be available to hospitals.

**Manufacturer** Janssen Pharmaceutical Ltd, Grove, Wantage, Oxon OX12 0DQ

**Description** White, biconvex, scored tablets, engraved "Cis/10" on one side and "Janssen" on the reverse. Each contains cisapride monohydrate equivalent to 10mg cisapride.

**Uses** Treatment of symptoms and mucosal lesions associated with gastro-oesophageal reflux and relief of symptoms of impaired gastric motility secondary to disturbed and delayed gastric emptying associated with diabetes, systemic sclerosis and autonomic neuropathy.

**Dosage** Adults and children over 12 One tablet three or four times daily depending on symptoms and

response, taken 15 to 30 minutes before food or at bedtime. A 12 week course is recommended for gastro-oesophageal reflux and six weeks or longer for impaired gastric motility.

**Side effects** Abdominal cramps, flatulence, diarrhoea, headaches, lightheadedness and convulsions.

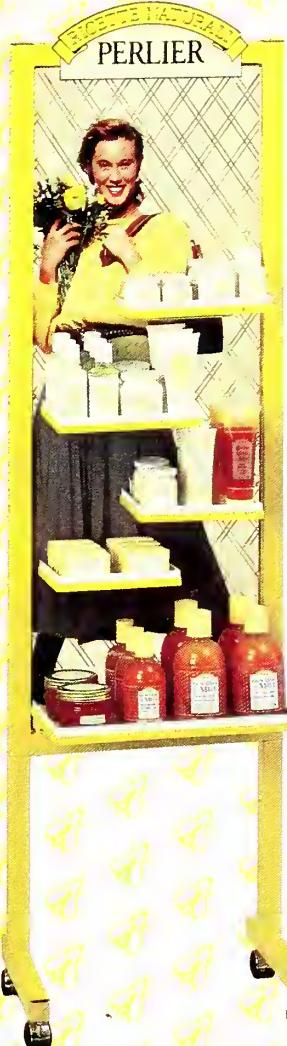
**Contraindications, warnings etc** Pregnancy or where gastric stimulation might be dangerous such as gastro-intestinal haemorrhage, mechanical obstruction and/or perforation.

**Interactions** Prepulsid accelerates gastric emptying and absorption of concomitantly administered drugs may be diminished in the stomach or accelerated from the small intestine. Sedative effects of benzodiazepines and alcohol may be accelerated. Beneficial effects on motility are antagonised by anticholinergics. Prothrombin time may be increased in patients on anticoagulants.

**Supply restrictions** POM  
**Packs** 10mg tablets (112 £36 trade)  
**Product licence** 0242/0136



A TOTAL RANGE OF SKIN & BODY CARE



# Would you like a silent salesman in your shop **FREE?**

For many years Perlier have led the field in the study of natural products from their ultra-modern laboratories in Milan and Turin.

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Be adventurous and take one on. They won't come alone either because there's a host of promotional literature too. Like a product range poster, full colour consumer leaflet and point-of-sale showcard.

Just imagine what a difference all this will make to your business.

Simply fill in the coupon for more details, because with our silent salesmen in your shop you can be sure to have a natural recipe for profitable success – the Perlier way.



## Would you like our Salesman to call?

I would like to receive more information on the Perlier range

YES

NO

I would like a Perlier Representative to contact me as soon as possible

YES

NO

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ADDRESS \_\_\_\_\_

POSTCODE \_\_\_\_\_

TELEPHONE NO \_\_\_\_\_

Please tick if you are already a Perlier Stockist

CD154

# COUNTERPOINTS

# Farenheit pour le corps

Christian Dior are introducing a range of Farenheit grooming products, from May 15.

Shaving foam and shaving cream cost £7.95 each. Both are said to give a rapid and precise action.

Aftershave balm (£14.50) is said to be light, non-greasy and moisturising.

moisturising. Body and hair shampoo (£9.50) is an all in one formula with a mousse base. The range also comprises soap in a travelling case (£6) and deodorant in a CFC free vaporisateur or stick (£9.50 and £7.95 respectively) together with fine talcum powder. *Parfums Christian Dior (UK) Ltd. Tel: 0273 515021.*

# Rimmel gets cheeky looks

Rimmel are introducing new looks for eyes and cheeks, with new fresh colours and more stylish packaging, in burgundy and gold.

There are two cheek colours complete with brush (£2.35 each). The sunrise, sundown, sunset trio consists of pale apricot, ripe strawberry and warm winter shades; rosebud/bouquet/-blossom consists of pale candy, ripe cherry and warm cerise shades.

Two new blush duos (£1.89 each) come complete with brush. Desert Ways is a combination of sand, and terracotta shades. Sunkissed Tones is a combination of caramel and coffee tones.

Two new single blushes have been added to the Blush One range: soft carmine called rosy silk

and a soft russet called rich silk (£1.79 each).

Two new Aqua shades feature a debossed surface wave pattern, complete with two sponge applications (£1.75 each).

Two new Pearl Eyes (£1.49 each) have been produced, both with flock applicators, renaissance roses comes in dusty pink and burgundy pink shades, and venetian violets comes in pale purple and royal purple shades.

Spring blossom is a clean and bright cherry pink which has been added to the Eye Spy single smooth eyeshadow range (£0.99) and midnight, bilberry and mahogany shades, have been added to the liquid eye liner range (£1.59). *Rimmel International.*  
Tel: 01-637 1621.

# Glow to go

Rimmel are introducing a loose powder called Bronze Glow which they say is "designed to give any complexion a healthy, sunny look".

The powder (£3.99) is said to be a blend of ultra fine pigments, talc and pearl shimmer for a natural looking finish, together with walnut powder to help absorb oil. It comes in a burgundy drum container with an internal lid to help prevent spillage, complete with a powder puff.

Customers can also buy a brush for £0.99 by writing to Rimmel, enclosing a proof of purchase while stocks last.

Bronze Glow has not been tested on animals, nor does it contain any ingredients derived from animals say *Rimmel International*. Tel: 01-637 1621.



Look no further  
for the relief of conjunctivitis  
due to hay fever

# OTRIVINE-ANTISTIN

## xylometazoline hydrochloride, antazoline sulphate

## Sterile eye drops



Zyma (UK) Limited, Alderley Edge, Cheshire SK9 7XP      Detailed information will be sent on request



# A nice little earner from Numark

Numark are continuing their onslaught on the profitable Mother and Baby market this Spring.

Our superb quality, top value Numark products will be featured in full page colour ads in consumer magazines, starring this bright little lad.

In addition, Numark Chemists now receive a special Numark brand merchandising pack as well as the usual comprehensive collection of eye-catching point-of-sale and display material.

If you're not already enjoying advantages like these, contact your local Numark wholesaler or Geoff Bass at Central Office (0985) 215555.

In an increasingly competitive market, Numark's the proven way to boost your sales.



**NUMARK**  
CHEMIST

THE BRIGHTEST WAY TO SHOP



## Beecham vitamins for 'all your life'

Beecham Health Care have launched two new vitamin products which have been developed into a range with four of their existing vitamin brands.

New products are Ribena Children's vitamins A, C, D and C-Vit vitamin C, D. Existing products are Yeast Vite, Phyllosan, Iron Jeloids and Vymin which have been repackaged to form a co-ordinated range to cater for "all the times of your life".

The new range is designed to have impact on shelf and to be easily identified. Each pack features Beecham Health Care umbrella branding in the form of a "seal", and provides (on three sides) directions for use, nutritional information, a list of ingredients and generic information on the contents.

All containers have foil safety seals, providing tamper evidence, and adult-use products feature an anti-arthritis cap for easy opening by hand or with a pen in a groove in the cap. Ribena children's vitamins have a Click Loc closure for added security.

Ribena vitamins (50, £2.10) contain vitamin A 750mcg, vitamin C 30mg and vitamin D 2.5mcg. They are chewable, blackcurrant flavoured tablets recommended for children aged three years and over in a one a day dose. Sugar-free C-Vit vitamin C tablets (50, £1.95) contain vitamin C 75mg. They are also chewable, with an orange shape and flavour, in a one a day dose for all the family. Both new products contain no artificial colours, flavours or preservatives.

The rest of the range come in two sizes: Vymin 30s, £2.99, 50s £4.75, Iron Jeloids 60s £1.65, 150s £3.20; Phyllosan 90s £2.59,

159, £3.32; and Yeast Vite 50s £1.89, 100s £3.19. And Vymin multivitamins and minerals now include vitamin B6 (2.5mg) and beta carotene (750mcg). Beecham added the latter, which is converted in the body into active vitamin A, because of research into its properties as a free radical scavenger. The dose is unchanged.

A shelf organiser is available to merchandise the range, and it holds a consumer guide to essential vitamins and minerals.

Beecham Health Care are backing their family vitamin range with a £500,000 Summer Press advertising campaign in leading women's magazines, national newspapers and health magazines. This will be primarily targeted at housewives, and will adopt an educative and informative approach, say Beecham Health Care. Tel: 01-560 5151.

## Pretty logo

Pretty Polly will be unveiling a new image to the public in the Autumn. The P&P logo has acquired a "distinctive and contemporary" look while retaining the "authority and distinctiveness" of the traditional logo and is both stylish and feminine, the company says.

The new logo won positive responses when tested on consumers as part of company research, say Pretty Polly. And they add, this new corporate identity will endorse the company reputation for top quality hosiery, reinforcing Pretty Polly as a major fashion specialist in this field.

Pretty Polly. Tel: 0623 552500.

## Ginkgo Biloba makes UK debut

Reevecrest have introduced Nutrimental 24, a health supplement containing an extract from the leaves of the ginkgo biloba tree. The product is widely used on the Continent and has a product licence in France and Germany, where sales reportedly exceed over \$400m a year.

The product is presented in blister packs of 30 torpedo shaped tablets (£9.95), each containing 30mg of a standardised extract of ginkgo biloba and 100iu of vitamin E.

Ginkgo Biloba is a species of tree, now originating from China but found in Europe around 150 million years ago. The fan shaped bilobate leaves are harvested in the Autumn and contains a complex mixture of flavonoid glucosides and terpene derivatives.

The presence of flavones, which are known for their vasodilator effect mediated through catecholamine release, explains the observed

pharmacological actions. European research suggests GBE 24 (the standardised extract) may have beneficial effects on the cardiovascular and nervous systems. Inhibition of clot formation, a protective action against cerebral ischaemia, and dilatation of peripheral blood vessels are among the actions of GBE 24 identified by various researchers.

The recommended dose of Nutrimental 24 is one or two tablets daily, to be taken as a food supplement. Reevecrest Healthcare Ltd. Tel: 0252 726543.

## Rubinstein's shaper

Intensive Shaper from Helena Rubinstein is claimed to alleviate the unsightliness of cellulite.

The gel is said to contain liposomes charged with "liporeducers" which penetrate into the fatty deposits, helping the skin lose its lumpy look.

Intensive Shaper (150ml, £20.50) is smooth and non-greasy, for application after a bath or shower. Helena Rubinstein Ltd. Tel: 01-979 7744.



## Body Mist boost

Beecham Toiletries have relaunched Body Mist deodorant and shower gel offering "freshener" fragrances and brighter packs.

New aerosols are chlorofluorcarbon free and dawn and wild fresh are now available in non-aerosol spray pumps (100ml £1.59). New fragrances have been chosen for "freshness and lightness" and packs come in bright rather than pastel colours.

Beecham forecast that the antiperspirant deodorant market will be worth approximately

£123m this year. The shower gels and liquid market is valued at £27.1m with an increase of 17 per cent predicted this year.

With shower gel and deodorants Beecham aim to offer all over protection. A sampling programme through women's magazines has been planned for the body gel. This will complement the new £2m television campaign for the APD. Large (175ml) and economy (225ml) aerosols are both available in added value cans offering 25ml extra. Beecham Toiletries. Tel: 01-560 5151.



## HOW TO STOP GOING THIN ON TOP



Numark are introducing a much enlarged range of own label, environmentally friendly products.

Already in the shops is a haircare product that won't cause baldness: a CFC-free hair-styling mousse that won't further damage the North Pole's thinning ozone layer.

Plus pulp fluff nappies that contain none of the dioxins which help create acid rain.

Others in the pipeline will similarly meet demands from the increasing number of

customers sympathetic to the Green Movement.

Numark is already the choice of around 2,500 caring chemists. If you would like to join them, contact your local Numark wholesaler or telephone Geoff Bass at Numark Central Office (0985) 215555.



THE BRIGHTEST WAY TO SHOP

# NEW SLENDER PLAN. T

## New plan

It's good news! Carnation is about to launch the new **Slender Plan**. This is a major development for **Carnation Slender**.

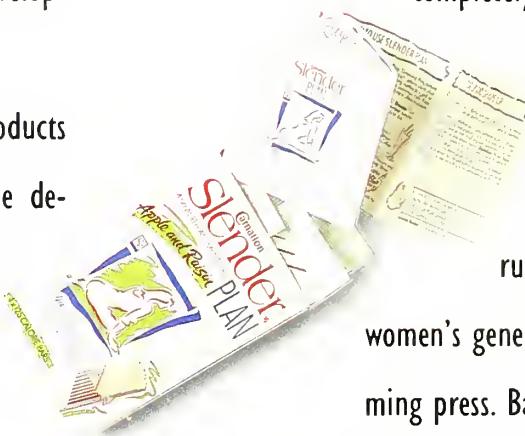
There's an improved, wider range of products providing an effective diet programme designed to help safe and sensible weight loss. This is a 'mix and match' diet plan, allowing the consumer maximum flexibility of choice.

It's sure to have massive appeal for today's slimmers. And **Slender Plan** is available only from chemists.



*The* SLIMMING  
PLAN WITH  
MEAL APPEAL

## New Advertising



The **Slender Plan** will be introduced with completely new £3/4 million plus advertising campaign which is friendly, newsy and informative. These advertisements will run in tandem in high circulation women's general interest and specialist slimming press. Backed up by full P.O.S. support. The editorial flavour of the ads makes them highly visible and readable.



# KICKING OFF IN A BIG WAY.

## New look new product

We've totally redesigned the image of Carnation

Slender with the Slender Plan. New

impactful packaging using a modern  
illustrative style will give high shelf-

presence with broad appeal to consumers.

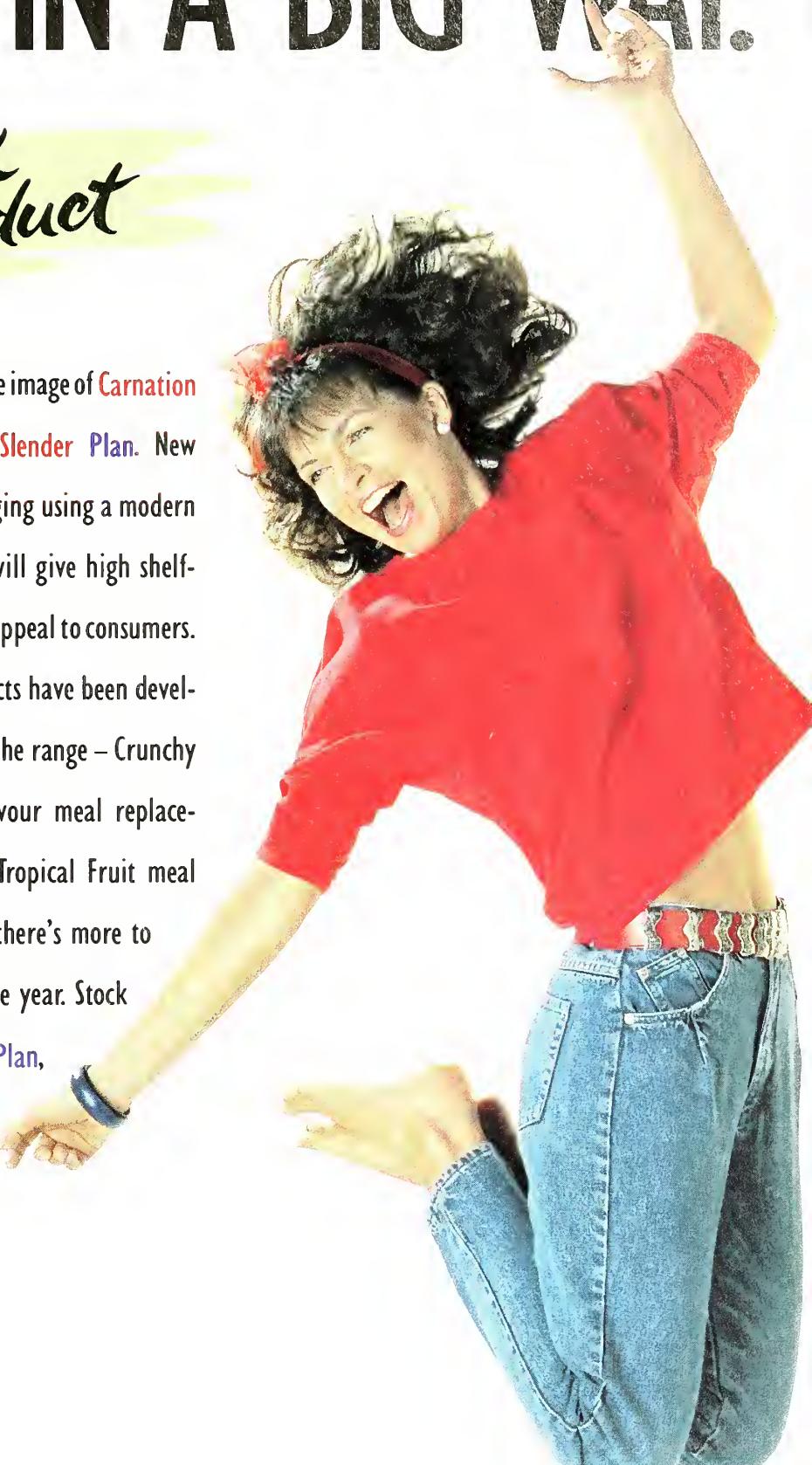
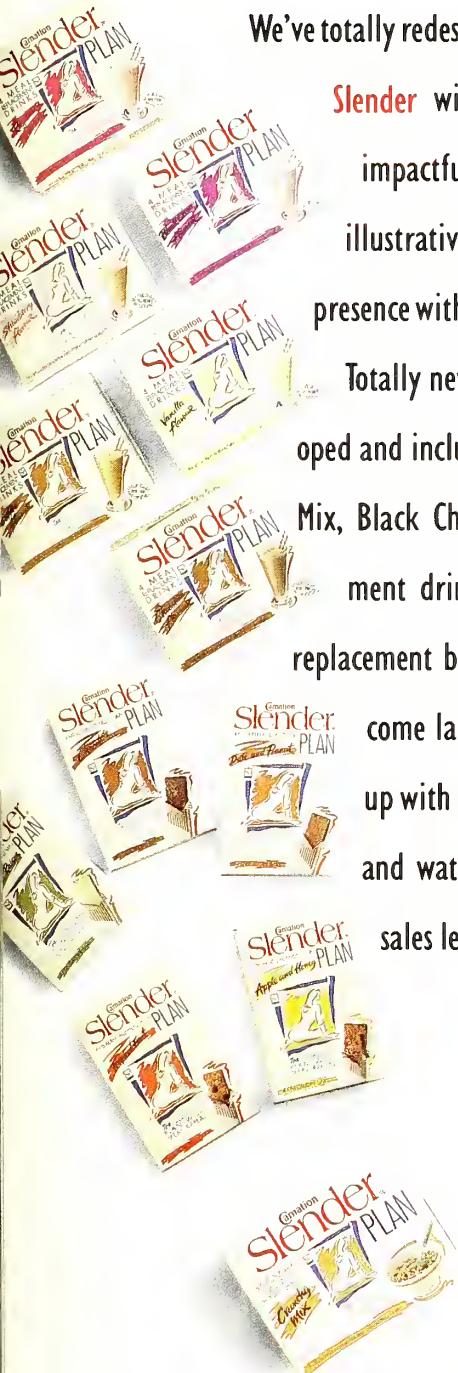
Totally new products have been developed and included in the range – Crunchy Mix, Black Cherry flavour meal replacement drink and Tropical Fruit meal replacement bar. And there's more to

come later in the year. Stock

up with Slender Plan,

and watch your

sales leap!



# Carnation Slender. PLAN

Slender Plan can help slimming or weight control only as part of a calorie-controlled diet.

## £0.6m boost for Elancyl

A £600,000 campaign for Elancyl bodycare products by Pierre Fabre Ltd is designed to create a better understanding of the problem of cellulite.

From April to July, double-page colour advertorials — will appear in women's magazines including *Vogue*, *Elle*, *She*, *Marie Claire*, *Cosmopolitan* and *Living*. They feature both the original Elancyl massage glove method, and Elancyl MP24 body profiling gel.

A consumer competition is to be run this Summer, and will give a weekend trip to Paris and two weekends at Ragdale Hall as main prizes along with free purchase coupons.

Other promotions are planned around the publication of a book called "The Bottom Line" by Diana Moran, television's "Green Goddess". Many facts and figures in the book, to be published on May 18, and costing £4.95, were supplied by the Elancyl research laboratories in France.

Stockists will receive new display material, and a window display competition, exclusive to independent pharmacies, which offers three prizes of weekends in Paris. *Alberto-Culver Co.* Tel: 0256 57222.

## Nestle's plans a Slender mealtime

Nestle Healthcare are relaunching Carnation Slender as the "Slender Plan". This includes five meal replacement bars, drinks in six flavours and crunchy mix muesli, which contains toasted wheatflakes, raisins, honey and almonds, and comes in single serving sachets. All three product types provide 35 per cent of the RDA of major vitamins to mix.

An integral part of the Slender Plan, say Nestle, is a slimming booklet which is available free of charge to the consumer. This provides advice on the essential points of slimming, and how the Slender Plan can contribute, the company says.

Packaging features a new Carnation logo. The plan will be backed with a £750,000 advertising campaign in women's slimming and general interest colour Press. The slogan for the new range is "The slimming plan with meal appeal" say *The Nestle Company*. Tel: 01-686 3333.



## Robinsons launch four new baby drinks

Robinsons baby foods are looking for a slice of the granulated baby drinks market with the launch this week of four fruit and herb varieties.

The company says that four years ago, granulated baby drinks took only 0.5 per cent of the market; by last year this had risen to over 20 per cent by value in an overall baby drink sector that has seen 400 per cent growth over the same period.

Robinsons say the four varieties — apple and mint, apple and fennel, orange and camomile, and orange and elderflower will pick up on the success of existing herb varieties and offer mums and babies more choice, with sales for babies under 3 months right through to toddlers.

The packaging reflects the rest of the Robinsons baby foods range, and the tins have rip-tear seals and resealable lids. Robinsons claim their 120g size will

prove popular with mums with a price point of £1.09. Packs are merchandised in trays of six.

The Robinsons range is being featured throughout 1989 in a national campaign on TV-am, and the company says the granulated baby drinks launch will be supported by its own new commercial featuring their Spikey Robinson hedgehog character.

The company also plans to distribute over 1 million samples through the Bounty Bag service reaching 83 per cent of new mums, and there are plans for covermounts and competitions in the mother and baby Press.

The drink packs will also be part of the Spikey loyalty scheme, whereby customers can obtain various items of Spikey merchandise in return for proofs of purchase across the baby foods range, the company says. *Colman's of Norwich*. Tel: 0603 660166.

remaining 50 per cent use the test after day five, when a single test is adequate." A free helpline is open from 9am-5pm on 0800 525522. *Tambrands Ltd.* Tel: 0705 474141.

## Tambrands go for a single test

Tambrands are launching a single test First Response pregnancy kit for £5.95.

The new single test kit uses the same technology and components of the existing five minute First Response double test kit, said to enable a woman to identify whether or not she is pregnant on the "very first day of her missed period".

Tambrands say research conducted on women using First Response showed that only 50 per cent of women used the kit within the first five days of a missed period. "In these circumstances, a second test is recommended to confirm the results. The

## Flix pix for slim Jims

Flix's new poster campaign kicked off last week, to run alongside their national cinema campaign which began last month.

It is aimed at those aged 18-25 and runs nationally with sites in the London, Glasgow and the Newcastle undergrounds.

The advertisements come in male and female forms with the message "Waist Not, Want Not" and the catchline "Now you can give up sugar without giving up the taste". *Searle Consumer Products* Tel: 0494 21124.

## Oral B's £1.5m spend

Oral-B Laboratories are supporting their Oral-B professional toothbrush range with a £1.5m television advertising campaign.

Commercials of 10 and 20 seconds will run for five weeks, focussing on the consumer benefits of the brush while reinforcing Oral-B's strong association with the dental profession, says the company.

Launched in January 1988 Oral-B plus is said to have an 11.9 per cent sterling share of pharmacy toothbrush sales, *Oral-B Laboratories*. Tel: 0296 432601.



## Kwells '89

Kwells are to be supported by a promotional package for 1989, including point of sale material and an assistants' competition.

The competition, called "Broadway beckons", offers two top prizes of a three day return trip to New York for two plus £200. The winners also receive two Broadway show tickets.

The 50 runners-up will receive a travelling iron. The competition has been produced in a leaflet which is available from the Nicholas sales representatives.

Full POS materials is available from *Nicholas Laboratories Ltd.* Tel: 0753 23971.

## Conotranne promotion

Point of sale material for Conotranne cream, including a counter display unit, shelf edgers and leaflet holders are available from Windsor Pharmaceuticals in a promotion running from May 8 to June 30.

Andrew Dixon, healthcare development manager at Windsor says there has been increased demand through nurses' and health visitors' recommendations. *Windsor Pharmaceuticals Ltd.* Tel: 0344 484448.

# Another good reason to dispense with the competition.



UniChem's latest launch should have UniChem chemists whooping with delight.

With our range of own brand remedies for dry and chesty coughs as well as a children's linctus, you'll have the market covered.

The new formulation and bright packaging should go down a treat.

In order to avoid congestion, we recommend you give it plenty of room on your shelves.

Because with 22½% bonus and 42½% profit on return, it won't take many swallows to make your summer.



**UniChem**

UniChem Ltd., UniChem House, Cox Lane, Chessington, Surrey KT9 1SN Tel: 01-391 2323



## Keep them trim with Wahl

Wahl Clipper Corporation of America have introduced a moustache trimmer which they say is simple to use and suitable for all styles of moustache.

The new trimmer is battery operated, lightweight and compact. It incorporates a powerful motor and precision ground blades, the company says.

Presented in a full colour "visipack" the Wahl moustache trimmer (£11) comes with trimming attachments, moustache comb, wax, cleaning brush and blade guards. There are short, medium and long-cut attachments which facilitate accurate tapering, bleaching and defining, says the company. *Wahl Europe Ltd.* Tel: 0227 740066.

## Young leisure wear

Joytime Continentals, are to launch a new range of colourful jogsuits and boys' cardigans, trade price £4.40 each, in machine washable spun polyester.

The jogsuits, for boys and girls up to the age of seven, are suitable for all seasons and even double up as pyjamas, the company says.

For a young child, motifs with teddy bears and balloons are displayed in various colours, on a plain pink or blue background and for girls a colourful "woman work-out" scene is in pink or turquoise with piping down the trousers and a stripe down each sleeve. A third design for boys is in either sky or navy blue with striped cuffs, neckline and base, and features marines in bold letters with a sailor.

The range of cardigans look like jackets, having double-breasted buttons, pockets to each side and lapels. In navy blue, and sizes for children aged two to seven. *Joytime Continentals Ltd.* Tel: 01-278 4433.

## DENTAL CARE PRODUCTS FROM BUTLER, LEADING ORAL HYGIENE SPECIALISTS

Recommended by dentists, the complete range for good oral hygiene - Proxabrush Interdental Brush System, Dental Tape, Dr Bass Floss, Flossmate, Floss Threaders, and of course a toothbrush for every member of the family!

CLEVELAND WAY, HEMEL HEMPSTEAD, HERTS. HP2 7DY ENGLAND. TEL: HEMEL HEMPSTEAD 69301.

## Fast Aid's extra value

Robinson will be backing the relaunch of their First Aid adhesive plaster range with consumer offers. The first will be 15 per cent extra free on 1m dressing strips and four extra plasters free in the 24 dressing packs.

Available in durable, flip top plastic boxes and handy wallet packs, the packaging has been redesigned and colour coded for recognition of plaster type and shelf impact — red for stretch

fabric, green for clear, and blue for washproof. And in a response to consumer research Robinson have made product improvements, including an increased number of plaster sizes within their assorted packs, larger size medicated dressing pads, easy peel plaster wrappers and new skin tone colours.

All assorted, dressing strip and wallet packs are available in counter display units. *Robinson Healthcare.* Tel: 0246 220022.

## Scottish crop for bath

Scottish Fine Soaps are introducing a strawberry and peach collection of translucent glycerine soaps, foaming bath seeds, shower gel and shampoos.

Packaging has a botanical-style colour illustration with gold detailing and French nomenclature.

Strawberry or peach perfumed 75ml shampoos, bath gels and creme moussant retail for around £0.99; foaming bath seeds should sell for £0.65, glycerine soap tablets cost £2.25, 220ml shower gels cost £2.55 and liquid soaps cost £2.75. All products are packed in cases of six units.

Distributed by *Carronshore Marketing International.* Tel: 0324 558505.

## Hawaiian Tropic tan tips

Warner Lambert have launched a Hawaiian Tropic Tanning Research Bureau to advise on all aspects of tanning.

This service will be available to all by dialling 100 and asking for freephone Tanning Research. Open from 9am to 4pm every weekday, the bureau will also give

information on Hawaiian Tropic's ranges.

Warner Lambert are also offering 'The professional tanning guide', at point of sale. This guide provides information on the tanning process, sun protection factors, helpful tanning hints, notes on some of the world's best sunbathing beaches and the Hawaiian Tropic range itself. The booklet is designed to fit into a filofax, say Warner Lambert, providing an all year round reminder of the company's products.

For the retailer there is a separate product reference guide giving range information and details of the Tanning Research Bureau, together with POS material. *Warner Lambert Healthcare.* Tel: 0703 620500.

## Numark mousse goes CFC-free

Numark are launching a CFC-free styling mousse in line with their new "environmentally friendly" stance announced at last month's Convention. The mousse comes in both normal and firm holds and the price is unchanged at £0.95.

Numark nappies have been converted to dioxin-free and sales and marketing controller Geoff Bass says Numark are looking to convert to Green products wherever they can. *Numark.* Tel: 0985 215555.

## Campaign for Tramil

Whitehall Laboratories are supporting Tramil with advertising in national Press and women's magazines, running until May. Advertisements feature men and women suffering from intense headaches, and suggest Tramil as the solution.

The campaign is running in the *Guardian*, *Independent*, *Today* and *Times* newspapers, and in *Radio Times*, *TV Times*, and in *Company*, *Looks*, *Cosmopolitan* and 19 magazines. *Whitehall Laboratories.* Tel: 01-636 8080.

## Numark May promotions

May promotions from Numark include own-brand sponges, nail polish remover, beauty care range, Ultra Dri disposable nappies, cotton buds and soothers.

Also on promotion will be Nucross micropore, paracetamol, liquid paraffin, surgical spirit, calamine lotion, aspirin soluble, olive oil and zinc oxide. Numark will also be attacking the mother and baby market with a Press campaign in a range of magazines including *Family Circle*, *Mother*, *Under Five*, *Mother and Baby*, *Practical Parenting and Parents*. *Numark.* Tel: 0985 215555.

## Combination H gets a push

Whitehall Laboratories are promoting their Combination H product with a high profile newspaper campaign "at the height of the hayfever season".

The advertisements, in a selection of national daily and national Sunday newspapers, begin in May, and are targeted at women, say *Whitehall Laboratories.* Tel: 01 636 8080.

Colour catalogue available from

**DEN-TAL-EZ**  
DENTAL PRODUCTS (GB) LTD



# Dermacort® WORKS A TREAT!

New extended consumer campaign running NOW includes:

Full colour advertisements in TV Times and major women's magazines

+ Nationwide coverage on the Independent Radio Network

+ Bold and effective point-of-sale materials

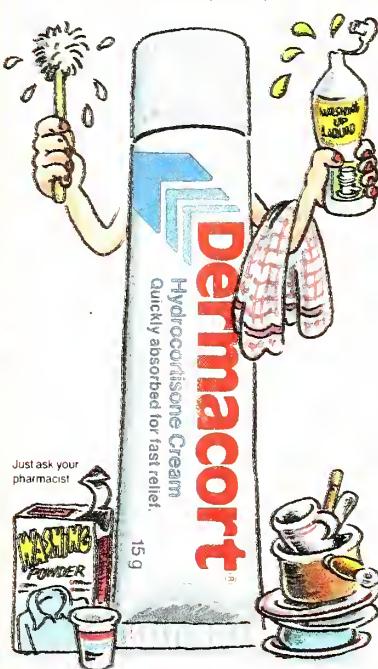
+ Informative customer advice leaflets

Dermacort cream – gentle, soothing treatment for itches, rashes and skin irritations – reactions caused by soaps and detergents, bites and stings, perfume, jewellery, rings and things ...

## FOR SOAP AND DETERGENT RASHES IT WORKS A TREAT

Troubled by an itch or a rash?  
Use Dermacort cream – gentle, soothing treatment for itches and rashes due to soaps and detergents  
– also reactions to plants, insect bites, jewellery and deodorants.

Available without prescription



**Dermacort®**  
What a relief!

## FOR HOLIDAY RASHES IT WORKS A TREAT

Remember last summer – those bites and stings?  
This year, don't let skin irritations spoil your holiday!  
Dermacort cream – gentle, soothing treatment  
for insect bites and skin irritations  
due to reactions to plants, jewellery,  
deodorants, soaps and detergents.

Available without prescription

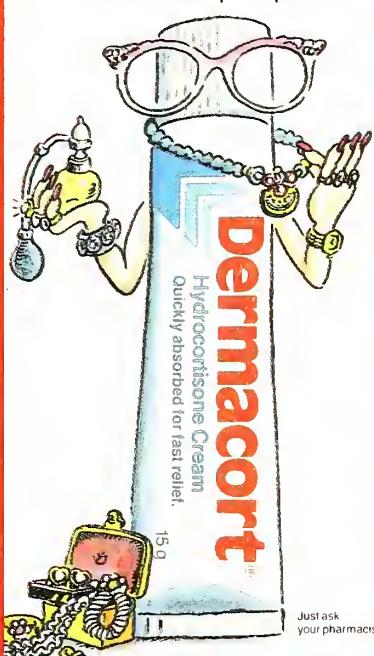


**Dermacort®**  
What a relief!

## FOR PERFUME AND JEWELLERY RASHES IT WORKS A TREAT

Bothered by an itch or a rash?  
Use Dermacort cream – gentle, soothing treatment  
for itches or rashes due to perfume,  
deodorants or jewellery  
– also reactions to plants, insect bites,  
soaps and detergents.

Available without prescription



**Dermacort®**  
What a relief!

**Dermacort** is unique – containing 0.1% hydrocortisone, offering clinical efficacy at least equivalent to the 1.0% formulations (full data available)

**Dermacort** provides a full 50% mark-up on cost + special quantity bonuses

**Dermacort** Hydrocortisone Cream 15 g. retails at £1.85

## Dermacort® will WORK A TREAT for YOU!

## Setters boost

Beecham Health Care are offering new counter stands and free-standing display units for their Setters range.

The offer coincides with the brands latest television exposure — an £800,000 national campaign that runs now until the end of May.

The company also says Eno is being repackaged in a more modern livery that will not go too far from the "trusted and recognised Eno identity". Beecham Health Care. Tel: 01-560 5151.

## Ribena goes orange

Beecham Bovril Brands are introducing two new Ribena ready-to-drink products — strawberry, and orange and apricot.

Children rated the strawberry highly, while orange and apricot appealed to older consumers, and scoring even higher than Ribena blackcurrant, say Beecham.

Multi-media support over the Summer and promotions to encourage sampling is planned. Beecham Bovril Brands. Tel: 01-560 5151.



## Drumming up business for razors

Wilkinson Sword are adding to their twin fixed and swivel disposable razor range with a storage container promotion and an added value offer this Spring. Both varieties of razor will be available to the consumer this month and next in a free storage container holding 15 razors.

The storage container promotion will be followed in May/June with an offer of six

razors for the price of five, 12 razors for the price of 10, and for the cash and carry sector, six added value packs for the normal price of five standard packs. Wilkinson Sword Ltd. Tel: 0670 713421.

Braun are introducing Oral-B brush heads to their range of electric toothbrushes. Braun Electric (UK) Ltd. Tel: 09327 85611.

## Hoechst's offering for Pet Week

Hoechst Animal Health have introduced a pet medicine pack available exclusively to retail chemists to coincide with National Pet Week from April 28-May 5.

Containing a range of PML registered pet worm and flea treatments, the pack is on special offer from Vetcham for a limited period.

The wormer in the pack is Hoechst's Panacur, available for dogs and cats. Panacur is effective against tapeworms and roundworms affecting pets, including *Toxocara canis*. The pack also includes Alugan, the contact insecticide available in aerosol, powder or concentrate form for fleas in cats and dogs.

With a trade value of £50, the full contents are: six packs (each including five sachets) of Panacur for cats and small dogs; six packs of Panacur for medium size dogs; and four packs for large dogs; six Alugan aerosols (140g each) and six Alugan powders (100g each).

To obtain the Hoechst pet medicine pharmacy pack, contact Neil Davies at Vetcham. Tel: 052-71351.

TEST DRIVE  
THE NEW ERA  
STARTER PACK

**New Era®**  
HELP YOUR BODY RESTORE  
ITS NATURAL BALANCE

No colourings. No chemical stabilisers. No artificial flavours.



# Kodak out for the day this Summer

Kodak announced details of a multi-layered Summer promotion last week, under the theme of "The great British day out".

The campaign features a new book, "300 Great Days Out to Remember", a discount scheme for entry into a variety of leisure parks, zoos and restaurants, and repackaging for the company's throwaway camera, the Fling 35.

There is also a holiday offer, running between June and September, offering up to £100 off breaks booked through most tour operators under the Kodak Holiday Travel Club. Discounts will be valid until 1991. And a new travel pack is available which includes a Kodak S series camera, a roll of Gold film, batteries and a five year guarantee. Two variations are available at £34.95 and £44.95 depending on the type of camera. The pack comes in a see-through protective case.

The book will be available from May 11 in high street retailers like W H Smith for £1.95. It includes suggestions on where to go, how to get there and what to expect when you arrive on your day out.

In tandem, the voucher

scheme offers consumers discount books along themes of: parks and zoos, castles, museums and stately homes, sport and travel, winter leisure, exhibitions and shows. The savings vary from one free entry worth £8.99 with three full paying adults at Alton Towers to 10 per cent off room rates at THF hotels. Voucher books are free with any three empty boxes of Kodacolor Gold or 110 film. Leaflets are available from the company giving details. The scheme that runs until September 1990.

Kodak are also introducing a "leisure card" for consumers, free with every twin-pack of Kodacolor Gold 35mm or 110 film. The credit card style voucher gives similar discounts to customers and will be made available from June 1.

The Fling 35 has been repackaged and has an extra promotional boost in that the company are offering £5 off the purchase of a 35mm camera with a Fling purchase. POS materials are available to support the whole campaign. *Kodak Ltd. 0442 61122.*

GTV Grampian  
B Border  
C Central  
CTV Channel Islands  
LWT London Weekend  
C4 Channel 4

U Ulster  
G Granada  
A Anglia  
TSW South West  
TTV Thames Television  
TV-am Breakfast  
Television

SK Sky  
STV Scotland (central)  
Y Yorkshire  
HTV Wales & West  
TVS South  
TT Tyne Tees

<b>Bisodol:</b>	U,STV,B,G,Y,TVS
<b>DDD's stain devils:</b>	TV-am
<b>Disprol Adult:</b>	All areas except LWT,C4 & TV-am
<b>Disprol Junior:</b>	All areas except LWT, C4 & TV-am
<b>Endekay dental health gum:</b>	Y
<b>Grafic:</b>	All areas
<b>Listerine antiseptic mouthwash:</b>	All areas
<b>Nurofen:</b>	All areas
<b>Nice 'N Easy:</b>	C,LWT
<b>Oral-B:</b>	All areas
<b>Reach toothbrushes:</b>	TV-am
<b>Sanatogen vitamins:</b>	G,HTV,C4
<b>Setlers:</b>	All areas
<b>Simple skin care range:</b>	All areas except LWT & TV-am

## Readyspex gets stood up

A new stand containing ready-to-wear reading glasses will be available from Readyspex Ltd in May.

The stand (£132 trade) holds 42 pairs — 12 retailing at £2.99 (half eye), 18 at £4.99 with

plastic lenses and 12 at £9.99 with superior frames and British made glass lenses. There are nine powers in the range and they are from 1.25 to 4 dioptres. *Readyspex Ltd. Tel: 0254 51535.*

The New Era Starter Pack doesn't hang around. In fact, all 6 remedies will be out of your shop before you can say homoeopathic medicines.

And there's a good reason for that. More and more people are realising that homoeopathic medicines are a good idea. Because they're effective. They're safe. And there are no side effects.

But don't take our word for it. Sample the starter pack and see. Then come back for more.

As well as our best selling remedies you'll receive three free New Era booklets, consumer leaflets, and a display stand. And it's all backed up by a national colour campaign in women's press.

Ask your Seven Seas representative for details.

SEE  
HOW FAST  
IT GOES



New Era®  
Flatulence,  
Colicky Pains,  
Indigestion  
E

New Era®  
Brittle  
Nails  
K

New Era®  
Nervous &  
Migraine  
Headache  
F

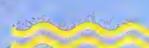
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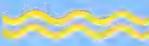
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# the green wave

**Time was when the only thing that consumers wanted to be green was their tea. Now the green revolution is sweeping the High Street and consumers are voting with their purses, as well as their feet, and seeking out environmentally friendly alternatives. Aerosols account for 70 per cent of the antiperspirant and deodorant (APD) market and over the past year manufacturers have responded to environmental concerns by removing problem chlorofluorocarbons (CFCs) from formulations. Here, we look at the latest in ozone-friendliness with APDs that keep your customers fresh, without costing the earth.**

As the debate about CFCs and the ozone layer hits the headlines the public's awareness of their role in spreading the "hole in the sky" is growing.

Last year, Rachel Waterman, chairman of the Consumers' Association, claimed that consumers were boycotting all aerosols because manufacturers were not indicating which ones were ozone-friendly. "Consumers are deeply concerned about environmental issues and are eager to make their own contribution to the protection of the world they live in," she told a conference on ozone depletion last November.

A survey of the Association's members showed that environmental pollution was rated alongside drug abuse as one of the most serious problems facing mankind. And of the top 20 environmental issues that caused concern, aerosols and the ozone layer were rated second alongside nuclear waste and ahead of acid rain, chemicals used in agriculture and dirty beaches. People said that they thought CFCs and the ozone layer posed a "very serious threat to their health" which was as great as that posed by nuclear waste.

So consumers are obviously aware of the problems and many are now making informed choices between CFC-free aerosols or avoiding aerosols altogether.

## Most APDs now CFC free ahead of deadline

Most manufacturers have responded to the call and are using alternative propellants in their products. Most have gone back to hydrocarbons, as less harmful CFCs are unlikely to be developed for another ten years.

In this respect the UK is at least ten years behind the USA, which banned the non-essential use of CFCs excluding those for medicinal uses like inhalers, in 1978.

Manufacturers here have been, slowly switching to alternatives since around the start of the 80s (C&D, June 11 1988), and eight major users announced last year that they would phase out the harmful gases by the end of this year. Most of the change-overs have already taken place ahead of schedule.

Changing over involved huge investment in new plant and research and development facilities, with companies spending around £1m each.

Problems that needed to be tackled included the need for extra care when handling highly flammable butane, and its different liquid flow characteristics required special valves on machines. There were also problems with compatibility between propellant and can, especially a tendency to corrosion.

APDs have been among the last product groups to become CFC-free, because they are the most difficult to reformulate. Extensive consumer trials were conducted to ensure aesthetics were maintained. Trish Lucas, Elida Gibbs' brand manager for Impulse, explains: "Our biggest worry was a change in perception of the product but our tests showed that many loyal Impulse users found that it enhanced fragrance perception. Another worry was a decrease in use because hydrocarbons are lighter and the altered pressure means that less product comes out, but we managed to maintain spray flow rates." Hydrocarbons are also said to produce a spray that feels a lot wetter.

Cussons installed £1m of new equipment at their Nottingham factory; the change-over has been planned for more than two years and on-site work has been taking place over the past year, says the company.

A few weeks before this year's international conference on ozone depletion called by the Prime Minister, Margaret Thatcher, Beecham announced a switch to alternative propellants at a cost of more than £1m. Their factory at Maidenhead, Berkshire is said to produce approximately 50 million aerosol units for a year for UK and overseas markets.

Most new cans will be flashed with a symbol indicating that they are "ozone friendly" as well as having a statement on the back highlighting the absence of "chemicals known to damage the earth's ozone layer".

Pharmacists should make the most of new merchandising issued by companies, as consumers are likely to be seeking out "earth-safe" products and pharmacists' specialised knowledge will give them an edge over multiple grocers. One way to capitalise on the green revolution could be to have a section devoted to "ozone-friendly" products. Pump action sprays, roll-ons and sticks should also be included.

Could this add another dimension to pharmacy's "green cross" campaign?

**Aerosols will figure large in the advertising ratings this Summer as manufacturers move to dispel any negative attitudes consumers may have developed to such presentations. Meanwhile stick and roll-on brands will be seeking to exploit any advantage the ozone issue can give. The APD market is in for a long, busy Summer.**

## APDs move into action

The reformulations made necessary by the move away from CFCs have given many manufacturers the opportunity to bring out new packs and variants. All in all, late 1988 and early 89 has been one of the most active periods in recent times and manufacturers are pledging huge sums to support brands through the high usage Summer months.

Leading the way will be Gillette, who announced recently that their aerosols are CFC-free. They are spending £2m to support Right Guard, 25 per cent more than in 1988. "We are making an aggressive bid for brand leadership in the fast growing APD market," they say. Right Guard currently accounts for 10.8 per cent of the total market, with sales up 12 per cent in 1988 over the previous year. Sales through chemists increased 33 per cent. Right Guard believes this reflects the growth areas of the market: young men, and women aged 15-34. "The latter group account for more than a quarter of units sold and buy their toiletries where they buy make-up, in chemists," say Right Guard.

The market overall is growing 6 per cent year on year in sterling terms with unit values remaining static. This growth is coming from roll-on and solid sectors, areas that chemists have neglected in the past, according to Gillette: "It is vital that pharmacists have good distribution in these areas. Even though many aerosols are now CFC-free, with the adverse publicity concerning damage to the ozone layer there is a possibility that consumers may become 'aerosol negative'."

Right Guard's growth at 12 per cent, double that of the overall market, is due partly to continued heavy activity on television as well as aggressive pricing, they claim. Now the company believes the future lies in "niche" marketing, targeting variants for individuals to fit in with the "lifestyle" concepts developed in the eighties. "Right Guard has moved away from a sharing or family image to a more dynamic unisex range catering for the individual. Consumers are looking for products that reflect their individuality, from clothes to toiletries."

Right Guard's strength has predominantly been with male and family users, especially because of its perceived antiperspirant effectiveness. Appeal among women in their late teens and twenties has not been maximised, but that is all about to change with the new *Vogue* variant, aimed at capturing a large slice of this "fast growing market sector."

The new variant comes in aerosol and roll-on formats and a launch package of around £450,000 is planned. Full page advertisements in major women's magazines will follow the themes of fashion with the catchline "Whatever she wears, she wears *Vogue*".

And Right Guard's five other variants now boast new graphics giving a "modern range with individual descriptors which are more relevant to the consumer of today". The £2m television support mentioned earlier will continue the "reach out" theme, which, says the company, was highly successful in 1988.

And how can chemists build on their small, but rapidly growing share in the APD sector? "Stock advertised products, including roll-ons and other forms, and concentrate on display," is the advice from Gillette. "There should be three separate merchandising sections, the main one for aerosols which account for 70 per cent of the market, an area for roll-ons with 20 per cent and at least half a shelf for solids."

### Natrel Plus

Gillette's "natural" brand, Natrel Plus, launched at the beginning of last year has taken a 3.9 per cent unit share of the aerosol sector of the deodorant market, 3.1 per cent of roll-ons and 4.9 per cent of solids. Gillette feel that the success of Natrel Plus is due to the brand's "caring, natural proposition", based on plant extracts. It was developed in response to consumer demand for products which are both effective and gentle, they say.

The Natrel Plus user is most often aged between 18 and 34 and is from social groups ABICI and C2. A television campaign featuring the "camouflage" commercial was no doubt a major factor behind the brand's success, and this theme will be continued again this year, with a £2.7m spend. Three new variants have just been added: xores roll-on, xores solid and ylang solid. Gillette say the additions complete the range making all three fragrances xores (male), ylang (female) and fouger (unisex) available in roll-on, solid or aerosol formats. In addition, the fouger variants will have a "fresher, more natural fragrance".

### Body Mist relaunch

Like Gillette, Beecham Toiletries are also geared up to capture the attention of women with the relaunch of Body Mist this month.

"The male market is very cluttered, unlike the female sector which has been neglected over recent years but accounts for one-third

of the total deodorant market," says Cathy Heseltine of Beecham.

Body Mist has been around since the 50s and has a strong heritage: "In our research 23 per cent of women named it as one of the first two APDs they could recall," she says. "We found that women wanted a deodorant that was definitely personal and very feminine, without being patronising."

Beecham have responded to these demands and launched new packs which "present consumers with a distinct identity that's totally relevant to today's needs". A repertoire of new fragrances has been used that reflect the fashion for freshness and lightness. New packaging uses a combination of graphics and colourways, based on strong contemporary colours (as opposed to pastels previously used) that reinforce the femininity and personal freshness messages.

All new Body Mist aerosols are CFC-free. In addition, wild fresh and dawn fresh, which Beecham say are the two most popular fragrances, now come in 100ml non-aerosol pump sprays, and roll-ons and solids complete the options.

The relaunch will be supported by a £1.5m television campaign complemented by £300,000 on Press advertising and a sampling campaign for the shower gel. The message here is to offer consumers all over protection right from the start, protection that is completed when they use Body Mist deodorant after showering, Beecham say.

### Gibbs hold onto No.1 and celebrate with Impulse

Sure are current holders of the number one position in the APD market, and the addition of two new variants last year, active solid and roll-on for men, contributed significantly to overall growth, say Elida Gibbs. Sure has 16.1 per cent share of the total market and dominates the aerosol sector with a 16 per cent share, and accounts for 23 per cent of solids. In the roll-on sector the brand holds the number two position with a 13.5 per cent share (all shares sterling value).

A major spender in media terms, some £3million will be spent on national television and Press advertising this year. In-store promotions will include extra value and twinpack offers in specific accounts.

Impulse, Elida Gibbs' perfumed deodorant body spray, this year celebrates its tenth birthday. And to cap the occasion, the 100,000,000th unit has just been sold



Right Guard gets a new look with variants tailored for individual lifestyles

"Impulse created the body spray market in the UK in 1979. Originally it was positioned between antiperspirants and perfumed products," says Trish Lucas, brand manager.

Impulse's target market is 16-24 year olds although there have been users varying from 12 up to 65 years, says Trish Lucas. Older women may prefer a variant like a Hint of Musk whereas the younger ones like Chic, "a fragrance that is thoroughly French". And last year's was On Fire, "providing an image that exuded a mix of confidence and sexuality".

The brand has always been heavily supported by television advertising. Over £21m has been spent since launch, says Ms Lucas. Recent advertising has been geared towards the promotion of individual variants. And always the link between Impulse and flowers has been stressed. For the fifth year Impulse will run its free flowers with Interflora scheme starting in May.

Impulse holds almost 60 per cent of the female body spray sector which, Gibbs say, was worth £33.7m at rsp in 1988. During 1989 £3.2m will be spent on an advertising campaign including national television, Press and posters. Late last year the range became ozone friendly and this change is flashed on packs.



## New look for Arrid

Carter-Wallace, manufacturers of Arrid, say the popularity of sticks and solid is growing although usage remains low overall. Usage is significantly higher among men (10 per cent) than women (6 per cent).

The company says users of sticks and solids still do not understand the differences between them: "Sticks contain a deodorant but have no antiperspirant to check perspiration, whereas solids have both a deodorant and antiperspirant and are preferred by most users. In most cases trial has not led to a repeat purchase because brands may leave a white deposit on the skin which rubs off and stains clothes."

Last month the company introduced a new Arrid solid antiperspirant which has been formulated to be non-whitening, and which it claims does not leave behind a deposit. Arrid solid is available in unscented and "for men" versions. Arrid extra dry APD aerosol was

recently relaunched and roll-ons in new designs and fragrances are available in unscented, shower fresh and soft pink variants. Promotional packs of 50ml plus 20 per cent extra free are on offer. Arrid for men has also been relaunched in two new variants regular and light. And all of the company's aerosols now have non-CFC formulae and carry an "ozone safe" symbol.

## Dry steams ahead

Cussons claim the fastest growing deodorant brand with Imperial Leather dry, with a 21 per cent sterling growth last year.

Dry, which is now ozone friendly, has benefitted from the £1m campaign for Imperial Leather deodorant and haircare products. Cussons say the advertisements are a new direction for Imperial Leather, which has always perceived as a family brand, but now is appearing in "fashion-orientated advertisements" in women's magazines.

During April and May both sizes of aerosols will have 25ml extra free and the roll-on will have 25 per cent extra on offer. This promotion will be repeated in July and August to coincide with the Summer peak, say Cussons.

## Roll-on fight at the top

The fight for number one in the roll-on sector continues between Amplex and Mum. Bristol-Myers claim an 18 per cent by volume (19 per cent in 1987) share for 1988, and give Amplex a 16.5 per cent share. But Nicholas Laboratories claim to be outselling all other roll-ons. "Amplex is now showing an 18.1 per cent volume share ahead of its closest rivals Mum and Sure," say Nicholas.

Roll-ons grew by 1 per cent in volume last year (sticks put on 2 per cent and there was no change for aerosols). The shift is believed to be a result, in part, of the anti-aerosol lobby and ozone controversy. During November/December aerosols grew by 5 per cent in value compared with a 12 per cent growth for roll-ons, say Nicholas.

Stephen Orchard, toiletries marketing manager at Nicholas Laboratories, says the brand's performance is due to a positive response to advertising, and that a new television campaign is planned for the Summer. Nicholas will be offering a special display tray of its six variants and Stephen Orchard promises "a profitable opportunity for retailers who stock our full range."

## Vasigil on offer

Combe International are supporting Vasigil with a £0.50 off next purchase offer. The talc-free feminine powder is suitable for the control of vaginal moisture and the odour and irritation that it can cause, say Combe.

"Once having tried Vasigil many women switch to using it as an all over body powder to provide extra comfort from chafing due to overweight", the company says.

Year round advertising in women's magazines supports the product and Combe claim that 75 per cent of all women will have seen an advertisement ten times.

## Vichy pump it up

Vichy say sales of their pump-action, non-aerosol deodorant increased dramatically when they added an ozone-friendly sticker to packs last November. The product works by neutralising odours, unlike conventional

deodorants. Vichy claims that it is more effective and longer lasting, continuing to work more than ten hours after application.

Vichy's deodorant is currently on offer with 25 per cent extra free, and is being promoted alongside a variety of bodycare items including deodorant spray, body milk and hip and thigh cream, in a special mixed merchandiser.

## Soft & Gently does it

Colgate-Palmolive's Soft & Gentle will be supported later this year with a television campaign aimed at re-aligning the brand with its core value of femininity. Some £3m will be spent on this campaign which will be backed by an extra 25ml free offer on 150ml cans. An "environmentally friendly" formula of Soft & Gentle, using hydrocarbons as propellants, will be available from April 24.

## Make more out of Femfresh

Advice for getting the most out of a widening market for Femfresh comes from Crookes. Sales of the range of cleansing tissues and deodorant spray increased by more than 10 per cent over the 12 months to end January 1989 and Crookes are predicting growth of around 24 per cent this year.

"Research has shown that users see Femfresh as an addition to their daily cleansing routine and it is seen as particularly handy for holidays or while travelling," the company says. "It fits into the hectic active lifestyle of the 80s' woman wishing to freshen up during the day or after work before going on to a social event."

Crookes suggest positioning Femfresh with other cleansing wipes, body deodorants or other products for the holiday season. "The most popular siting in pharmacies for Femfresh is with the sanpro range due to its use during menstruation. But this positioning could reduce sales by inferring that its use is limited to one specific time of the month."

Promotional activity includes a £65,000 advertising campaign in women's magazines, during June and July, targeted at women aged 25-55 and a toiletry bag offer running until May.



Jeyes claimed to have created a new sector in personal hygiene with Halkie Moists introduced last Autumn. Designed for use after dry toilet paper, the wipes are made of biodegradable paper impregnated with a mild cleansing lotion. Jeyes predicted fast growth for Moists in the £445m toilet paper market. A magazine advertising campaign is currently underway, featuring four naked rears of a family. "Moists should be positioned with dry toilet tissue rather than just with other wet wipes," the company recommends.

# YET ANOTHER PAINKILLER COMMERCIAL WITH WOMEN IN WHITE COATS.

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Not only will your customers remember our name, they'll never forget our face.

# NUROFEN



Behind the best names.

# Improvements lead to increased use

**A once static market, the rate of sanpro development has picked up in the 80s, leading to growing use**

Almost all British women now use disposable sanitary products, spending an average £9.20 per year on them. The female population still remains relatively static, but the age profile of sanpro users is actually shifting, says Ian Jones, of Kimberly-Clark.

Women start their periods earlier and reach menopause later. It may even be delayed with the increased usage of hormone replacement therapy. "The end result is that consumers are in the feminine hygiene market for longer," he says. And as women become more concerned about personal hygiene at all times of the month, increased replacement frequency of STs and additional usage keeps the market growing.

David MacFarlane, group product manager of Scott, makers of Bodyform and Libra, gives an outline of growth areas in sanpro: "Press on towels showed a 1.5 per cent (volume) increase in 1988. The number of consumers fell slightly year on year, due to the slackening of the baby boom of the 60s, slowing down growth that had occurred in press ons. But although volume has fallen in terms of numbers of users, it is still being driven by increased frequency of use."

Pant liners now represent a third of the external protection market, according to Mr MacFarlane. This sector showed growth estimated at 17 per cent in volume terms last year, driven by increased usage and larger penetration of the target market. Around 35 per cent of women are using pantliners, and this is growing strongly year on year.

Seven years ago looped towels had a 10 per cent by volume share of the total market, and as press ons have grown in popularity, this is steadily decreasing at 15 per cent year on year, and loops now represent only 4 per cent.

Another shrinking sector is that of mini towels, which Mr MacFarlane predicts, will eventually disappear. At present mini towels hold 2 per cent with most consumers using them along with additional protection. "The development of the pant liner has killed that market," he says.



The Kimberly-Clark towel range including new Brevia weekend pouch packs

## KC advise on guarding share

"Watch out for further erosion of market share to multiple grocers" is the advice given by Ian Jones, marketing manager of Kimberly-Clark's adult care division. He says that independent chemists, whose share of the external sanpro market is 23 per cent, are still not maximising their full sales potential.

"If chemists are not to see that share diminish further they must take into account the rapid growth of new market sectors, allocating an appropriate amount of space to new products and displaying ranges that meet customers' requirements."

Towels are the most buoyant sector, says Mr Jones, now worth £82m. Trends to watch out for are developments in slim towels, individually wrapped press-ons, pant liners and high absorbency towels, usually designed for night time use.

Multiple usage of products is growing in importance. About 30 per cent of women use both full-size towels and tampons and 12 per cent use full size towels, with a slim towel, pant liner or mini pad. Just under one in four (19 per cent) use three methods, ie full size towel, combined with slim towels, pant liners and tampons, at varying stages of a period. And it is forecast that by 1990 one in four women will be using three methods.

Kimberly-Clark's Simplicity is still brand leader in the towel sector. Last year sales grew by more than 15 per cent over 1987 while the total external market grew by just 2.3 per cent, claims Mr Jones. He attributes their success to product superiority and innovation supported by strong continuous advertising and promotional activity. Simplicity 1 and 2 now account for 24 per cent of the maxi press on sector, which is 57 per cent of the total external market. And Simplicity Night-Time, introduced in 1986 continues to perform strongly, with growth last year of over 75 per cent.

"However this is one area where chemists are not taking full advantage of market expansion, and are trailing behind grocers in switching customers to higher absorbency press-on towels," says Mr Jones.

The slim, press-on sector particularly in

folded and wrapped products, is growing rapidly with some users trading off absorbency for the discretion that slimness brings. Last year Kimberly-Clark launched Brevia Weekend, a pouch packed product that brought new users to the brand, which grew by 25 per cent last year.

## S&N shaping up for the 90s

Over the past decade the trend has been to offer more discretion, first with press on towels instead of loops, then with slimmer towels and shaped products, says Andrew Frost, marketing manager Smith & Nephew.

"In terms of towels there was a lapse until 1985, when folded products came in," says Mr Frost, an example of quick work by the industry since the technology to make them had only become available late in 1984. Now due to the demands of women the market is again responding as they want their protection to be as discrete as possible.

Last month, S&N launched Shapes, a contoured towel to take them into the one sector in which they have not been represented. Contoured towels is the sector the company believes has the strongest growth potential for the 90s and S&N predict that shaped towels will take 15.6 per cent of the external market in 1990 (compared with 9.6 per cent last year) at the expense of "premium" brands (34 per cent in 1988; 24 per cent in 1990). Slim products will grow to 25.4 per cent of an external market worth £63m in 1990, from a 1988 value of 21 per cent of a total £58m.

The product promises of "modernity, absorbency and shape" will be conveyed to consumers with an advertising campaign taking the major share of the £1.2m allocated for the Dr White's range.

A novel feature of the double page advertisements planned for women's magazines in May and June will be the use of three-dimensional diagrams of the shaped towel alongside a conventional towel, accompanied by 3-D glasses. The product features an hourglass shape "for maximum absorbency where most is needed" and tapers to minimum bulk at the ends.

## Secrets of sanpro manufacture

**What is a sanitary towel made of? How do tampons get that cylindrical shape?**  
**Dr G. Howarth, technical director of Smith & Nephew, gives an insight.**

Smith and Nephew have applied their medical manufacturing knowledge and experience to the production of sanitary protection products in Birmingham for over 40 years.

Raw materials are medically approved and manufacturing must take place in a clean, hygienic environment which is regularly assessed microbiologically. The basic absorbent in sanitary towels is wood pulp which is first delibrated mechanically in a special mill to produce a continuous batt of fluffy fibres. This is the core of the towel, and as it travels down the towel making machine it is first wrapped in tissue, and/or fleece, followed by a plastic film placed on the back and sides of the batt. The batt is now complete and is cut to length to form the pad. Each pad is wrapped in a non woven cover, and the pads separated, leaving a gap for the end seals. These ends are now crimped using heat and

pressure so the contents are sealed.

This gives a continuous stream of pads, and the release tapes with adhesive coated in sections along its length are pressed on to the back of the towel, so that sections line up with the pads. The individual towels are produced by cutting at each of the crimped sections. The towels are collated, counted and automatically packed in a plastic bag ready for packing into a cardboard case for dispatch. A typical towel line runs at 400 towels/minute and the operators are all ladies.

In the case of tampons the basic raw materials are bleached rayon and cotton which are delivered in bales to the factory. These medical textile fibres are fed into a mixing, blending, opening system which separates out the bale material into small clumps of fibre of the correct blend of rayon and cotton. These fibre clumps are then automatically

## Scott go for Bodyform

Sanpro is becoming more and more a consumer toiletries sector in that it is now marketing lead, whereas 10 years ago it was production led," says David MacFarlane, group product manager of Scott.

The company's response to consumer demands has been to concentrate on the "commodity" aspects of the market, offering "high quality" sanpro but keeping prices down by moving into much larger pack sizes. Last November, the company launched Bodyform slender, aimed at 11 to 15 year olds just entering the sanpro market.

Shorter than a regular towel, the new variant is said to offer the absorbency and comfort benefits of a fullsize Bodyform towel but is shorter "to meet young girls' needs for a high level of discretion." A campaign in teenage magazines breaks this month.

Brand loyalty remains high and again the aim is to attract users in the early years. "About 95 per cent of young girls will use towels first before switching to tampons. About 35 per cent never switch to tampons. When women get older and have babies they move back to towels which tend to be the same brand as before," says Mr MacFarlane.

The Bodyform brand tends to do well in chemists because they have "good coverage" of young girls, but at the moment the distribution of slender in pharmacies is very low. This means pharmacists are missing out on repeat purchases.

New Libra purse packs were introduced earlier this year, and the aim is to phase out flat towels, says Mr MacFarlane. "The individually wrapped sector grew 25 per cent last year and approximately 20 per cent of all press-ons are so wrapped."

## TV clearance for sanpro ads

After a number of pilot trials, and amid signs of diminishing protests from objectors, sanpro television advertising was finally given the go ahead last year. The Independent Broadcasting Authority reached its decision after a two year test period begun on Channel

4 in 1986.

Advertisements are allowed subject to usual vetting and time restrictions, for Independent Television (including TV-am): ads can only be shown from 9am — 4pm and 9pm — close down on weekdays, and after 9pm on weekends and bank holidays. There are no formal time restrictions on Channel 4.

During the two year trial, viewers' attitudes were monitored and a significant shift in opinion was observed. "In July 1984, 55 per cent of those surveyed said such advertising should be allowed, 38 per cent that it should not, with 6 per cent, 'don't knows'. By March 1988, 66 per cent were for the sanpro ads, 30 per cent were against them with 4 per cent 'don't knows,'" says the IBA.

Looking at the spread of complaints received, a broad picture of increasing acceptance of the advertising over the period emerged. From May to November last year

level of dioxin has been found and they are calling on women to demand chlorine-free paper products.

The launch of WEN's campaign coincided with a "World in Action" programme on ITV, which looked at the dioxin issue (C&D, February 18). Dioxin levels ranging from 5 to 500 parts per trillion were found in a range of paper products, including sanpro. The programme implied that these low levels represented an unnecessary health risk. One of the largest manufacturers of sanpro, Smith & Nephew, said they received over 300 inquiries in response to the programme.

The company says it has been moving away from chlorine bleached paper for a number of years and hopes that by the end of next year, an alternative source — chemical thermo mechanical pulp (CTMP) will be used instead. "Without bleaching sanpro would be totally unacceptable to women as pulp is coloured brown. CTMP produces a product that is less than white," says Andrew Frost, marketing manager for Smith & Nephew.

Johnson & Johnson also announced that they would be replacing chlorine bleached pulp in Carefree products later in the year.

only 24 complaints were received. But between 1986 and 1988, 889 complaints were made. "Correspondents have all objected to the category itself and not the content, which is always portrayed with discretion," says Stuart Patterson of the IBA.

The new regulations have been cautiously welcomed by some manufacturers. Scott who had advertised Bodyform at its launch in 1981 and again in 1986, felt that the early guidelines were too strict and they could not get across the benefits of a shaped towel like Bodyform. The new guidelines gave the company an opportunity to try again and they went on air last June, backed by a Press campaign to give additional information. "With the campaign we are trying to get across the 'inner and outer confidence' theme linked to the product's unique shape," says David MacFarlane.

Smith & Nephew have decided against the use of TV for the launch of Shapes. "With a new product you have to look away from TV. We would not be able to talk to women about the product's benefits," says Andrew Frost.

## Product development marks the pace for the 80s

A significant factor in the growth of sanpro over the past few years has been the improvement in quality of products offered to the consumer. Long gone are the days when periods signified a temporary suspension of a woman's day to day activities.

Development of new products like pant liners, and now individually wrapped towels, have made life easier for women, with emphasis on product "discretion" giving them confidence to "carry on living" through menstruation — and fitting in nicely with the 80s "lifestyle" approach.

In terms of performance, levels of absorption and comfort, there have been major improvements over the past few years. Design developments include nonwoven cover slips making towels very dry, and more absorbent pulp pulling fluid away from the body. Better compression techniques for pulp have led to the growth of slim towels, and towels with rounded ends, introduced about four to five years ago. The use of multiple glue strips now gives added security.

## Tampons aiming at young users

Development in the tampon market is slow with companies concentrating on wooing young users with explicit advertisements in the teenage Press ads detailing advantages of one product over the other.

Tampax say the total market split for tampons last year (45 per cent of the total sanpro market) was 62.2 per cent for applicator and 37.8 per cent for digital. Brands in the former sector are Tampax and Contour. Lillets is left in the digital sector, along with own label, after Kimberly-Clark withdrew Simplicity/Fems last December.

Tampax claim to be leader in the total market with 27 per cent of all sanpro users choosing the brand followed by 16 per cent for Lillets. Advertising for Lillets continues in the teenage Press year round. And the company has just started sponsoring the British Amateur Gymnastics Association, involved in activities in 33,000 schools.

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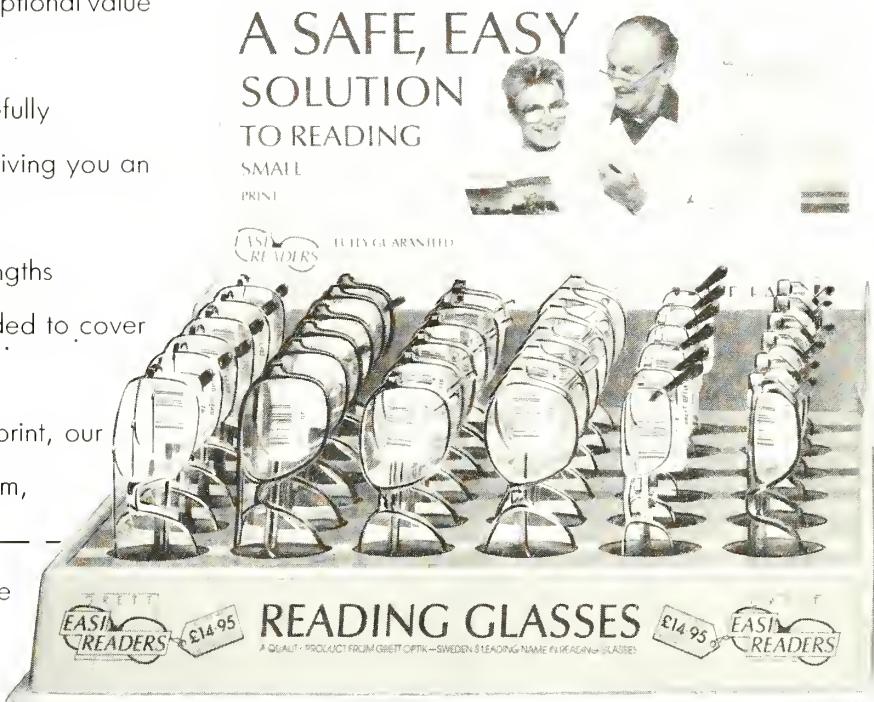
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# Pharmacists have 'hang-up' about signing yellow cards

Pharmacists have a "strange hang-up" about not being able to sign the Committee on Safety of Medicines "yellow cards" for reporting adverse drug reactions (ADRs) according to Rosalind Coulson, principal pharmacist with the CSM.

Asked when pharmacists were going to be allowed to fill yellow cards in, Miss Coulson said the UK's unique system, which is 25 years old this year, had always been firmly based in the clinical field. "At the end of the day my medical colleagues want to know what the consultant or senior doctor thought about the reaction. If pharmacists were to sign yellow cards we would have to do lengthy follow-ups."

Speaking at the Guild weekend school in Bangor last Saturday, Miss Coulson did, however, hold out some hope that joint signing might one day be a possibility. "However, just because pharmacists can't sign the card, that doesn't mean that they should abdicate their responsibility in getting doctors to fill them in."

Miss Coulson's appearance at the weekend school arose out of a request by the CSM to present a paper to celebrate the 25th anniversary of the yellow card scheme, and to re-emphasise its importance in patient care.

She said the CSM looked for reports of all ADRs to new products to build on the profile derived from clinical trials, and also to pick up ADRs so rare as to appear only when large numbers of patients have taken the drug.

For established drugs, serious reactions only need to be reported, as they could well have an effect on the CSM's risk/benefit assessment.

Miss Coulson said that hospital pharmacists could help by reminding doctors which drugs are covered in the new drugs section of the scheme. "50 per cent of all serious ADRs occur in hospital patients, so the low reporting in hospitals is a source of concern for the CSM."

Miss Coulson praised the results of "green card" scheme run in Liverpool, where all suspected ADRs, reported by doctors, pharmacists and nurses, are investigated by a clinical specialist and a pharmacist. "The scheme is very successful, resulting in a five fold increase in

reports through the green card in the first year. And two thirds of those reports ended in yellow cards to the CSM", she said.

Sadly, though, the preliminary results of a CSM attempt to reproduce this type of cross-professional scheme in other areas were "extremely disappointing". Miss Coulson, who admitted that it was really too soon to come to any definite conclusions, upset many in the audience when she said the failure of the CSM-sponsored schemes was "probably due to the role taken by the pharmacists themselves".

For the future, Miss Coulson said that a new adverse drug reaction on-line information tracking (ADROIT) computer would come on stream next year, and it would cover all UK licensed medicines, including OTC products and anaesthetic agents. She even held out the straw that one day there might be a scheme for reporting from community pharmacists. "There's a lot of data there that we really need to have access to," she said.

## Bangor '89 a cause for celebration

The 1989 30th Anniversary Weekend School in Bangor was one of the biggest, best organised and noisiest. Over 250 pharmacists from all over the UK, a sizeable group from Ireland and overseas gathered in the North Wales city for a busy 48 hours that felt like a week.

In addition to nine papers presented over three half day sessions, two Guild award papers were presented, 16 posters were judged and a medical exhibition attracted over 20 companies.

The organising committee from the Guild's North Wales Group had also persuaded the authorities for the first time ever to hire out Caernarvon Castle for a private function. And the Welsh male voice choir from that evening was more than matched after Saturday night's dinner dance by an *ad hoc* group led by the Welsh and Irish contingents.



Evans technical affairs director Barry Meacham (left), presents Mr Bill Brookes, the former president of the Guild of Hospital Pharmacists, with the 1989 Evans Gold Medal for outstanding national service to hospital pharmacy. In thanking Mr Meacham, Mr Brookes said that hospital pharmacists should never underestimate what the Guild has done for hospital pharmacy. "You may not think much of salaries and conditions now, but believe me, without the Guild they would be far worse." He told weekend school delegates they should not give up the argument over the White Paper. "Nothing is inevitable until it happens. Keep on opposing it and we will have a good try at making sure it doesn't happen." Mr Meacham presented the Evans silver medal to London principal pharmacist Mary Tompkins for services to hospital pharmacy at a local level

## New drugs: search continues

Prospects for the future development of new antibiotics are promising, but the search for new antifungal and antiviral agents is much more difficult because of the nature of the organisms to be treated, according to Ann Harris of the chemotherapy department, Glaxo Group Research.

The increasing problem of resistance, the toxicity of some of the existing agents, the prevalence of diseases, predominantly parasitic, for which agents have yet to be developed, and the emergence of new pathogenic strains of bacteria, like *Legionella* and *Salmonella enteritidis* and new challenges, like HIV, meant the search for better drugs will continue unabated.

Miss Harris said that, though some scientists might dispute the term, the discovery of antimicrobial drugs was still largely a matter of "assisted serendipity", with companies screening thousands of compounds a month for signs of activity.

In the antibacterial field, Miss Harris said the quinolones were a group which was likely to expand still further, though their activity through disruption of nucleic acid synthesis could be something of a drawback. There is renewed interest in the erythromycin family, the macrolides, with roxithromycin in phase three clinical trials. The newer agents in the group are being developed

with longer half lives, producing longer dosage intervals.

Miss Harris was sure that the cephalosporin group would continue to grow, because the drugs are relatively non-toxic. Three or four monobactams are in clinical trials and look set to follow aztreonam onto the market, and many other groups are in development, Miss Harris said.

The increasing sophistication of drug research meant that real "designer drugs" could soon be a possibility. Using computers it will be possible to visualise the binding sites which drugs can then be designed to fit.

Selective toxicity is a problem with antifungal agents, Miss Harris said. The mechanism antifungal activity of the successful imidazole group could also affect steroid synthesis in humans.

In antiviral therapy too, the host metabolism often presented a problem in achieving selectivity for the virus, particularly with molecules like AZT, which are close derivatives of natural molecules.

However, in the antiprotozoal area, things were a little more promising. With over 1,000 million Third World sufferers from protozoal infections, many of them asymptomatic, much remains to be done. "As the developed world begins to have a need for some of the compounds, this area may get more of the attention it deserves," Miss Harris said.

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## Big savings from antibiotic formulary

The implementation of a strict formulary for antibiotics at the Leeds General Infirmary brought the proportion of the drug bill spent on antimicrobials down from 19.8 per cent to 13.3 per cent in four years, principal pharmacist Jonathan Cooke told the weekend school.

The formulary suggests, for example, trimethoprim for urinary tract infections and cephadrine and metronidazole as antibiotic surgical cover, and has a strong reserve list for patients with particular problems. Since its introduction, the cost of antibiotics at the hospital dropped from £215,000 in 1982-83 to £185,000 in 1986-87, Mr Cooke said. Extrapolating against the overall drug costs suggested the hospital could be saving £100,000 a year. "It's a pity performance related pay wasn't in five years ago," Mr Cooke said.

"Pharmacists must be central figures in drug and therapeutic committees which should have authority to promote and implement strategies of drug usage," he added.

"Pharmacists are extremely effective members of the clinical team in promoting the use of antibiotic agents, being independent and objective. But teamwork between pharmacists and microbiologists gets the best results," he concluded.

## Oral cephalosporins should be 'reserve treatments' only

Oral cephalosporins should only be used as reserve treatments, consultant physician and lecturer in microbial diseases Roger Finch told the weekend school.

"The activity of the oral cephalosporins is very modest," said Dr Finch. "In my opinion, other drugs are more potent and

better tolerated as the first line treatment for urinary tract infections, for example."

He said that a drug like cefuroxime axetil (Zinnat) had been expected to open up a whole range of infections for treatment orally — like ear, nose and throat, urinary tract, gonorrhoea. "But

the more of the drug you give, the more side effects, particularly of the gastro-intestinal tract, you get. Only 60 per cent of the drug is absorbed and the dose does have to be kept down.

"Although it's an interesting compound, it's not yet the answer to our dreams," Dr Finch said.

## OTC antibiotics an 'appalling' idea

The idea that antibiotics could be available for sale by community pharmacists is "totally appalling" according to consultant microbiologist David Reeves.

"In countries where it is possible to buy antibiotics, like many in the Far East, antibiotic resistance is a real problem," Dr Reeves said. "In those countries, if people think they have something, they take a couple of

doses of antibiotics. I can think of no reason why in this country it should be necessary for antibiotics to be on sale over the counter."

Even GPs prescribing presented problems. "Hospital microbiologists and hospital pharmacists are on top of antibiotic prescribing. GPs are the people we should be educating, but it is difficult to get them together to do the job properly."

## Grading pegs pay claim

Uncertainty over the total effect of the regrading process has led Guild negotiators to peg this year's pay claim to a "cost of living" rise of 10 per cent.

Guild general secretary Dr David Bird told *C&D*: "We have no way to judge what impact the new grading structure will have on recruitment and retention of pharmacists. There have been

claims in the past for 30 and 40 per cent, but if grades are implemented correctly, there will be some large pay rises and we will not be able to judge the effect of that for some time."

The 10 per cent claim is based on the retail prices index — 7.8 per cent and rising — and the annual earnings index, currently running at just below 9 per cent.

## President issues technician role warning

Guild president V'Iain Fenton-May reaffirmed the Guild of Hospital Pharmacists' support for hospital pharmacy technicians in their search for a better pay and conditions package. But he warned that no-one should be confused over the roles of pharmacists and technicians in hospitals.

"Hospital pharmacy technicians are paid at an abysmal level," Mr Fenton-May said in his Saturday night dinner speech. "Guild Council will do everything in its power to help them in their just cause."

"However, I would refute anyone who says that technicians will do a pharmacist's job. What I will say is that some pharmacists have in the past done a technicians job."

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# How to pay for pharmacy service patients need?

**John Merrills, senior principal pharmacist at the Department of Health, has provided some insight into the fundamental thinking on how pharmacy could be reimbursed to provide a service that is in patients best interests.**

**At the beginning of his presentation to last weekend's Institute of Pharmacy Management International meeting in Windermere, he stressed the personal nature of his comments but suggested that his words held an important message for pharmacists if they cared to look hard enough — principally at themselves**

All Western countries are attempting to contain the cost of providing healthcare, each tackling the problem in their own way which should be viewed in the context of the political and cultural climate of each nation. But, said Mr Merrills, despite the trend to privatise a series of major nationalised industries in the UK, "I should not be doing my job if I did not make clear one decision that has been taken is that the National Health Service is not to be privatised". The Secretary of State has been quite clear about that, as has the Prime Minister.

It seems to me, he said, that there are two basic ways of funding a health service: either the Government pays or patients pay. That is very simplistic, of course, because the Government has no money of its own, it has only taxes — money it holds in trust for public good. Anyway, between these two extremes of payment is a continuum of designs which reflect varying degrees of intervention in the free market.

There is quite a lot one can do with the system's mechanics and still preserve the important parts from the end-user's viewpoint. It may not matter how the scheme is funded but some things probably do matter such as: culture of the society — its view on what it wants from a health service and how that health service fits into society; structure of the service — whether it comprises independent contractors or government employees, and culture of the profession.

The Government wants higher quality and greater choice of access to services, to secure value for money while putting patient needs first.

For pharmacy reliance on state funding has grown over the years to its present level of about 70 per cent of income. But how can taxpayers be sure their money is being used to best effect.

What has been pharmacy's

response to the increasing proportion of NHS business? Mr Merrills asked. "Only a handful of pharmacies have totally embraced the NHS, rejecting cosmetics and toiletries." Most continue with a traditional stock range, justified as providing a service to customers, when what their patients (clients) need is an increasing standard of pharmacy practice, responsive to changing ideas on health and improving education in health matters.

"Why does the RPSGB seek S.66 powers to control pharmacy premises? Because pharmacists have not put their own houses in order. How many pharmacists were keeping patient medication records? How many were visiting residential homes? These needs have not been invented this year, but they were clearly not being met under the lamented cost-plus contract. So meeting the incurred expenditure does not itself ensure that the service meets the needs of the people," he argued.

The cost-plus system is claimed to reimburse expenditure and encourage use of proper staffing levels, and proper equipment, and to protect against economic changes outside the control of contractors, eg rates increases, wages rises.

However, cost-plus is essentially inflationary, since as costs increase they are met, with little incentive to rearrange working practices to reduce costs. It does not promote efficiency of the sector as a whole. The averaging system which is a feature of the UK does that. It does not seem to have encouraged a wider role.

So, are other remuneration methods any better, Mr Merrills wondered. The method of calculation of the amount due can be varied. The method of distribution of the amount due can be varied. Arrangements for coming into the NHS can be varied. In fact, there are so many

variables it is difficult to see or imagine the effect of changes. Nevertheless the profession needs to consider the effect of change — it cannot leave all the work to the Government.

Mr Merrills thought a salaried service seems to produce a more professional approach, perhaps because there is no pressure to increase volume. Maybe there are other ways of achieving a similar effect. Any system which pays a substantial part of income unrelated to dispensing volume will do, he said. Thus you might have a basic practice allowance. One problem is to design a payment system so that the income relates in an acceptable way to the work performed. A single rate BPA does not do this. A banded BPA might, but then as more work is done more money is paid. Unless BPA is a high proportion of income the effect is lost. If it is a high proportion of income then there is a tendency to featherbed small, inefficient units.

A better solution, said Mr Merrills, is the capitation fee system. Each patient carries a fee for say one year's care. The more patients, the more fees. Patients have to register with a pharmacy. There is more encouragement to compete for patients. There is also an incentive to reduce dispensing load by keeping patients healthy. The cost of the medicine is not itself important, but stockholding is lowered if local doctors are encouraged to use cheaper medicines.

Disadvantages of a capitation system are many. It requires a lot of bureaucracy to work. Patients must register with a pharmacy and records must be kept to ensure accurate payment. The public loses some flexibility, and arrangements have to be made for people unable to go to their regular pharmacy, and for those who don't bother to register in advance. The issue of prescription charges must be addressed.

"These disadvantages can be overcome if the end is important enough," Mr Merrills said.

One way to encourage provision of specialised services to pay a specific fee. This is quite common in the GMS. But there are problems: take-up is uncertain and so the cost cannot be forecast and removing specific fees when the target is reached is seen as a retrograde step by the profession.

Other, more radical solutions have been proposed. It has been suggested that a few companies might tender to provide a national service at the lowest cost. The



*John Merrills*

are serious difficulties to be overcome when a new tender is accepted. We see this with television franchises, where the unsuccessful company may be left with useless studios. New entrants need considerable financial muscle. To the profession perhaps the biggest problem here is that tendering presupposes an over-provision at this moment.

The ultimate in meeting consumer needs might be to allow pharmacies to set their own fees to be paid by patients. Then the public could vote with its money, buying exactly the service wanted. The pharmacy could offer dispensing for a standard fee, cut prices for volume, pre-payment schemes, or a capitation fee covering any number of scripts a year, more akin to the American scene with special offers and cost cutting.

Every Western country trying to reconcile growing consumer demands for health care with constraints on the state expenditure. In all countries the state is funding an increasing proportion of the care for patients who are poor and elderly.

Insurance and state funding pays for a varying proportion of drug cost: in the UK it is some 70 per cent in France 65 per cent, Switzerland 52 per cent and Ireland 48 per cent, for example.

Although the percentage of

spent on health care varies between countries, the range is generally between 4 per cent and 11 per cent. For each country it tends not to vary over time, nor with changing political parties. The figure varies according to the system, in that insurance based US style systems inevitably contain an element for profit. Also the cost of collection of the funds may not be counted, eg in the UK. Hence the true variation may be less than is apparent from the crude figures.

Mr Merrills said it is important to note that percentage GDP spent on healthcare does not reflect health status. For instance Greece has the highest life expectancy among OECD

countries but spends only 4.2 per cent GDP on health. Conversely Sweden, with a relatively high percentage GDP has a higher than expected death rate.

The recent OHE report 'Costs and benefits of pharmaceutical research' suggests that there is no conclusive evidence that increased drugs expenditure has either been cost-effective or resulted in better health care. In that case is it so wrong to encourage a lower drugs bill by for example increasing generic prescribing, or by using indicative budgets to give improved awareness of costs.

The true test will be a change in health status.

## Putting a value on health benefits

Governments are constantly seeking value for money in services they spend taxpayer's money on. Health care is no exception. The problem is finding an effective measure of value so that different strategies can be compared. Professor Michael Drummond from the health services management centre at Birmingham University, described some ways health economists like himself used to try to evaluate different strategies.

Providing healthcare has a range of effects on individuals, some of which are easily measured in terms of their sterling value but others, such as a feeling of wellbeing and indirect benefits such as freeing resources, are more difficult to measure quantitatively as a cash saving.

Currently, research interests centre around a method known as cost utility analysis which measures added years of life adjusted for quality of life — so-called quality adjusted life years or QALY.

For pharmacists putting together drug formularies Professor Drummond outlined a few points to consider. First,



Professor Michael Drummond

being efficient is not the same as cutting costs. There has to be a balance between costs and quality. Secondly a broad view has to be taken of cost; it may be that a more expensive drug is cheaper to use in the long run because it may cut down on other costs, eg it may avoid hospitalisation. And third, the long term view needs to be kept in mind. For example, it may be best to give a treatment early to prevent a condition from becoming worse and needing even more expensive management later on.

## Formularies should be voluntary and flexible



Paul Beardon

Drug formularies should ideally be voluntary, they should be compiled by a consensus of those who are going to use them and they must be evolutionary taking account of pharmacological progress, pharmacist Paul Beardon, research co-ordinator, medicines evaluation and monitoring group at Ninewells Hospital, Dundee, told delegates.

Formularies are used to promote rational prescribing, to encourage familiarity with a limited range of drugs, to discourage prescribing new drugs unless they are an improvement on existing products, and, perhaps, to reduce costs.

Most formularies consist of around 250 preparations of around 30 drugs, Mr Beardon said.

Products which are genuine innovations should be included and formularies should be regularly reviewed and updated to take account of such developments. Excluded from a formulary should be: drugs about which little or nothing is known; all drugs in a

therapeutic class other than the two or three needed; expensive preparations except where there is no alternative, and rarely-used drugs.

Generics are not necessarily cheaper, especially where patients believe them to be inferior and refuse to take them or believe they will not work. Similarly, although combined preparations may be more expensive than individual components they may improve compliance providing a patient with a greater benefit. "In other words, if a patient takes a drug and it works it's better than not taking it and it not working even though there may be a greater financial cost," Mr Beardon explained.

Work done in Tayside on introducing a formulary has shown that prescribing costs have fallen. But the greatest effect on costs was seen when the formulary was being introduced, perhaps because at that stage prescribers were prompted to scrutinise what they were doing.

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Wendy Spicer (preregistration officer) proposed that an assessment form should be available, to allow confidential assessment of tutors by graduates. At the moment quarterly assessment forms do have a space for comments but many graduates are reluctant to indicate that they may be having problems, and often they do not know who to get in touch with at the Society, said Miss Spicer. A special form would make the Society more "user friendly", enabling a graduate to make contact at any time during their training, she added. It would also give a more uniform assessment of training said Jackie Rolle (ex Brighton). Martin King, MPS, feared that this form might deter potential tutors. The motion was passed unanimously.

Delegates supported a motion that no employer offering preregistration experience should demand acceptance before December 1 in the year prior to employment. It was felt that a lot of pressure was put on some students to accept positions in one branch of pharmacy, before they had a chance to look at all the options. However, Garth Newberry, MPS, cautioned delegates about a possible loss of places for training, if restrictions were placed on employers. "In the future the prereg year will be split into two, and employers will be hard to come by," he said.

Conference supported a motion calling for preregistration tutors to have satisfactorily completed a trainers course every five years. There is still a great deal of dissatisfaction with training, and at present tutors needed just three years experience, said Sandra Hyde. Tutors should be formally assessed every five years. The two motions above will be put to the branch representatives' meeting in May.

The question of student loans was raised by Joel Hirst (Sunderland). Conference supported by a large majority his motion that the introduction of student loans, is against the best interests of higher education. Mr Hirst predicted that loans would put people off becoming students and would have a detrimental effect on recruitment into pharmacy. "It is important that pharmacists and in particular the Society are seen to be doing something about this issue," he said. "Everyone should be entitled to free healthcare and free education," said Andrew Stanley, MPS.

## 'Let pharmacists prescribe', says BPSA

**Portsmouth Polytechnic were the hosts of the 47th British Pharmaceutical Students Association's Conference last week. Preregistration training and students' loans were high on the agenda but a number of professional matters came under the spotlight.**

A wider role for pharmacists in the healthcare team could be provided by a category of "pharmacist prescribed" medicines, a suggestion which was widely supported by delegates.

David Kennedy (Robert Gordon Institute of Technology), proposing the motion, said that a new avenue would be opened up enabling pharmacists to provide a better service in keeping with the proposals of the Nuffield Report.

Doubts were expressed about accepting responsibility if a patient's condition worsened, and there was lack of access to medical records. The latter problem could be overcome by the use of patient medication records and "computer card" schemes, it

was suggested.

"This move would provide a very good basis for pharmacists to get a hold in primary health care and develop their screening role as well as helping doctors by reducing their work load," said Phil Romerill, MPS.

A motion that aspirin, paracetamol and antacids should be removed from the General Sales List, was passed by a large majority. It was felt that such a move was long overdue, and that these medicines should be "put in their correct place". Gary McCague (prereg ex Aberdeen), said that restricting sales to pharmacies would give these medicines the respect they deserved. "If aspirin is sold only in pharmacies the public will appreciate that it is a medicine and not just something for a headache."

David Kennedy, who proposed the motion, said that a project on interactions involving over the counter medicines, showed aspirin, paracetamol and antacids were the most common causes of problems.

Conference passed a motion deplored forced introduction of generic substitution in a bid to save money. Martin Oliver (international liaison officer) proposing the motion, said that changes in the Government's NHS White Paper were the "thin end of the wedge". Apart from considering possible adverse effects of variations in bioavailability, such a change

would compromise industry's position.

A motion deplored changes that have been made to the way the Government deals with the Pharmaceutical Services Negotiating Committee, was passed unanimously. Recent changes to the on-cost system were regarded as being ominous, especially in light of the way the medical profession "is currently being treated".

Unanimous support was also given to a call that dispensing doctors should be made to abide by the law and ethics on dispensing that apply to pharmacists. They should also come under the jurisdiction of the Society's inspectors, it was felt. "Restrictions on pharmacists are very tight and anyone doing our job should be subjected to the same standards," said Hilary Harper (student exchange officer).

A proposal that an equal number of unannounced visits by the Society's inspectorate should be made, in addition to announced calls, was passed by a slim majority, with a large number of abstentions. It was felt that the system of announced visits was still fairly new and had not been given a chance to work.

Unanimous support was given to a call for active encouragement of the pharmacists' role as adviser to residential homes proposed by Susan Hay (Portsmouth).

Preregistration again featured prominently in discussions.



Marion Rawlings, vice-president RPSGB and Martin Curry from the Society's education department are proud recipients of BPSA honorary life membership

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# Society to set up community pharmacist group?

The feasibility of setting up a membership group for community pharmacists is to be urgently considered, the Royal Pharmaceutical Society's Council decided last week. Alan Nathan said that although community pharmacists formed the largest group in the profession they were the only ones not to have a membership group to represent their interests.

The most important benefit of the Society's membership groups was to give pharmacists an opportunity to directly influence Council policy on matters affecting their branch of the profession through elected representatives serving on group committees.

The community pharmacy subcommittee only partially represents community interests. As a subcommittee of Council, all its non-Council members were co-opted in an individual capacity. However, Mr Nathan was not arguing for its abolition.

The Society's other membership groups arrange

meetings of special professional interest. Such meetings would be beneficial to community pharmacists since most work in professional isolation.

Another incidental benefit would be to give democratic representation within the profession to employees and locums, who constituted about half the community pharmacy labour force but who had no democratic voice.

Any objection on grounds of cost would be grossly unfair because community pharmacists contributed two-thirds of the Society's fee income.

Before long the traditional substantial influence of single proprietor pharmacists would be much less, said Mr Howarth, and the scene would be dominated by large multiples. Two-thirds of the membership would be working in that area. The Society should face up to the future and abandon the traditional master/employee philosophy which had existed since the Jenkin case and give

encouragement to the major group of members.

The secretary and registrar said cost would have to be borne in mind because the group could potentially have 17,000-18,000, members which could not be administered within present staff resources.

**Research support to increase** Council decided to increase the number of research scholarships the Society awards by one each year for the next three years, after which the impact of the new funding would be assessed. There are currently 15 annual scholarships, primarily intended to support full-time research leading to a PhD degree.

Steps will also be taken to augment the Society's scholarship funding from other sources. Pharmaceutical companies will be approached to try to persuade them to provide joint research scholarships, the initial target being to convert the Society's six unnamed scholarships into 12 joint scholarships.

It was also agreed that the

remit of Society scholarships should be extended to include grant applications to meet direct project costs for post-doctoral research. Such support would come from extra funding raised rather than through existing research awards.

The regulations would in future confirm that each scholarship would be renewable annually up to a total of three years, subject to satisfactory performance.

Council also agreed to improvements in publicising the awards, both to encourage applications and to seek financial support for the research funds.

**New look FP10** Council, having previously agreed that the FP10 prescription form should be redesigned, considered detailed proposals from Noel Baumber, pharmacist member of the Society of Family Practitioners Committee's council.

The proposed design has received favourable comment within the SFPC, but had not yet been officially adopted by the society. The community pharmacy subcommittee considered it a considerable improvement on the current design.

Council agreed to submit the subcommittee's comments for further improvements to Mr Baumber and to send a copy to the Pharmaceutical Service Negotiating Committee.

**Quiet spots** General support has been received from other pharmacy bodies for "quiet spots" to be provided in community pharmacies where conversation between pharmacist and a customer was unlikely to be overheard. Support had come from the Compan Chemists Association, the National Pharmaceutical Association and the Co-operative Pharmacy Technical Panel.

**Independent prescribing advice** Council is to press for community pharmacist involvement in pilot projects to assess how independent advice on prescribing could best be provided to GPs.

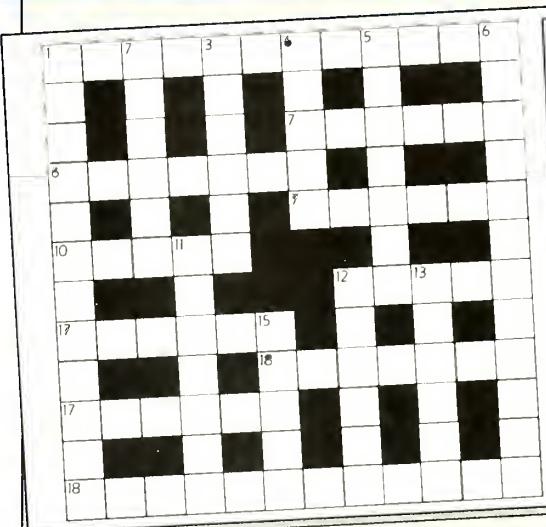
There was a pharmaceutical involvement in each of the six pilot FPC projects but not all had community pharmacist involvement. On the Practice Committee's recommendation Council agreed to send a letter to the district pharmaceutical office concerned with each project that had no community pharmacist input, emphasising the need for community involvement.

**Medicines disposal** Council agreed to approach the chairman of the House of Commons Environment Committee on the need for standard level of facilities in a local authorities for the disposal of unwanted medicines and pharmaceutical chemicals.

A letter had been sent to the

## WYETH GENERICS PHARMACY CROSSWORD NO. 11

The solution to No. 11 will appear alongside No. 12 in May, 1989.



### Clues Across

- Study a way of teaching about health [12]
- Dress the diced organs [6]
- Intermediate wager on nine being inside the weight [7]
- Secretly carry away the will [6]
- Therefore the bird joins the church [5]
- Disapprove of heartless fun over argument [5]
- First showings of French objections, and no ifs! [6]
- Frank with a fury tongue [7]
- Attack a maths puzzle [6]
- Infers from surplus dishes with nothing in [12]

### Clues Down

- Copy endlessly with water to produce sugar [12]
- Mint a hundred for him [6]
- Three times the pointless grain [6]
- Examines the matches [5]
- Mistake the layer outside for an animal [7]
- Birds to spend time in bad weather? [12]
- Machine to end all cars is a chromatic [6]
- Happy girl related to 16 [6]
- Align east [6]
- Trophy knife removed the Spanish [5]

Submitted by Mr Neile Taylor, Canterbury Kent

**Prizes of £5 will be awarded to the senders of the first 5 correct solutions drawn on 10th May 1989.**

Name  No. 11

Address

C&D

**Solution to Puzzle No. 10**

**Across:** 1 Judgement, 6 Spigot, 7 Cream, 9 Aspect, 10 Tar, 11 Tort, 14 Aeon, 15 Lie; 16 Elixir, 17 Spina, 18 Inacre, 20 Leukemia. **Down:** 1 Jap, 2 Digest, 3 Esteem, 4 Excite, 5 The ether, 6 Spatulas, 8 Mammad, 9 Arterial, 12 Deja vu, 13 Bifida, 14 Air arm, 19 NPA

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Mr J. Reynolds (right), chairman of Kensington, Chelsea and Westminster LPC, registers with Hazel Maxter for the Society's special general meeting in the National Theatre last Sunday, along with Mrs Rina Sawers from Glasgow

Department of the Environment about the variation in service pharmacists received from local waste disposal authorities, and asking it to take steps to provide standard facilities. No reply had yet been received, but in the meantime the Commons

Environment Committee had produced a report which supports the view expressed in the Society's letter.

**Unannounced inspections** The Law Committee was reminded of Council's decision that although the great majority of routine visits

by inspectors would be announced in advance there would also be unannounced routine visits. A target of 75 per cent of announced routine visits had been set. In March, 69 per cent of all routine visits had been pre-announced as to the week of the visit.

**Fees reminder** Formal reminders of overdue retention fees had been sent on March 23 to 5,284 pharmacists, compared with 5,666 at the same time in 1988.

Premises fee reminders totalled 735, compared with 841 in 1988. **Martindale donation** Council agreed to donate a number of copies of the Extra Pharmacopoeia (Martindale) 29th edition to schools of pharmacy and pharmacy information groups in developing countries.

Twelve copies are to be given to Oxfam to assist work within developing countries to produce information guides for prescribers. Oxfam had been promoting this work for about ten years, and about 40 developing countries are covered by the 12 groups of pharmacists and pharmacologists involved. Council also agreed to Dr Maddock's proposal that up to 30 copies should also be given to schools of pharmacy in developing Commonwealth countries.

**Manpower** The Society is to participate in a meeting convened

by the Department of Health to consider pharmacy school potential intakes and related manpower requirements for the profession. It also agreed to reconvene its manpower committee.

**Hospital academic units** A meeting is soon to be held at the Society's headquarters to discuss setting up academic units in hospital pharmacy.

**BPC 1992** Council accepted an offer from the Birmingham Branch to host the 1992 British Pharmaceutical Conference, at the University of Birmingham.

**Residential homes code** Council approved a draft code of practice for residential homes, prepared in conjunction with Age Concern. It was agreed the code would be used in discussions with the British Medical Association and the Royal College of General Practitioners, with a view to an approach to the Department of Health seeking an agreement that the code should be a prerequisite to registration of homes.

**Veterinary diploma** Council agreed the agricultural and veterinary diploma course should be open to pharmacists not on the British register. It approved a course fee for 1990 of £725 for pharmacists registered in Britain and £1,000 for pharmacists not on the British register.

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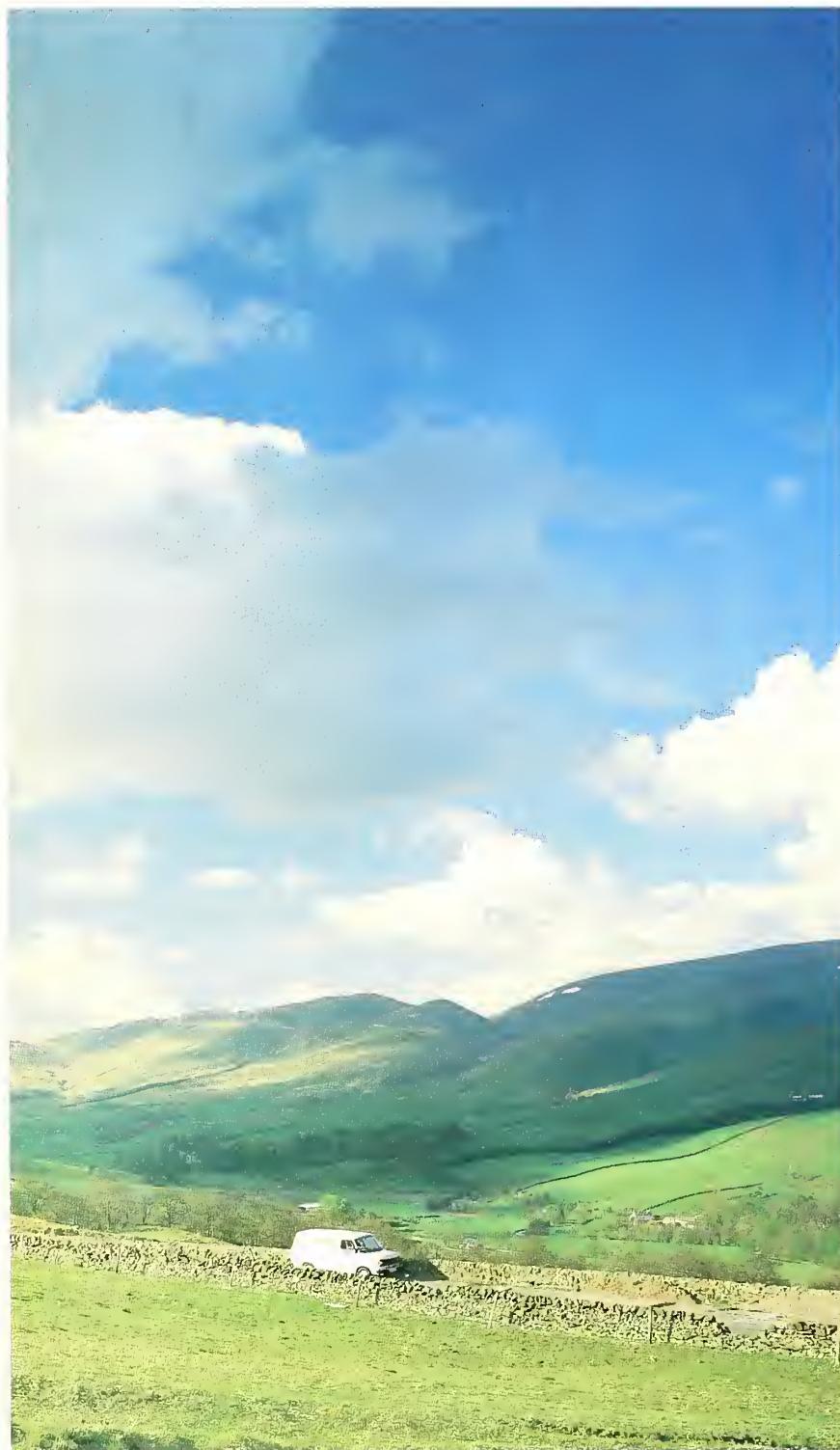
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# BUSINESS NEWS

## Farley's leave town

Boots are to close their Farley baby food factory in Plymouth in the Summer of 1990, bringing to an end a century-old connection between the brand and the town.

Up to 295 jobs could go as production of infant milks and cereals is centralised at their Kendal site. Farley's Rusks are to be made by a third party, Northern Foods Grocery Group, at their Uttoxeter plant which is to be updated.

Boots' public relations manager, Mike Caldwell told *C&D*: "We decided at our January review that the only way to expand the business was to centralise operations. The factory is quite old and too small to allow us to grow."

The decision forms part of Boots' drive to improve returns of their assets across all areas of their business and the performance of Farley's, where turnover is thought to be about £50m a year, is expected to improve through reduction of overheads.

Reaction in Plymouth has been likened to a "death in the family" by Mike Caldwell, but the company does not expect any industrial action. Management has been speaking to staff all this week about possible relocations to Kendal, where 30 or so jobs will be on offer, or employment elsewhere within the group.

Nearly 600 people work for Boots in Plymouth and the company is offering time-off for interviews and advice for seeking other employment, Mr Caldwell said.

Farley have been associated with Plymouth since the 1880s when local baker Edwin Farley established a range of biscuits for babies.

**Pearlglow Ltd** have acquired Broadway Cosmetics and subsequently the distribution of Barielle and Joli'bust products. The company says it will be relaunching Layla Cosmetics and is embarking on a strong PR campaign.

## Beecham SmithKline merger confirmed

Beecham and US company SmithKline have agreed a merger which ranks the combined group in the top four companies worldwide in its three key businesses: prescription medicines, OTC medicines and animal health products.

Both companies intend to dispose of non-core businesses in conjunction with the merger. As speculated last week (p597) Beecham intends to seek cash purchasers for their cosmetic and fragrance businesses, plus certain others. SmithKline will be disposing of Allergan.

The merger will be affected through a new UK holding company named SmithKline Beecham plc, whose worldwide annual sales will exceed £3.7 billion. Henry Wendt, chairman and chief executive of SmithKline becomes the new company's chairman and Beecham chairman Robert Bauman its chief executive.

Both SmithKline and Beecham boards and their financial advisers are recommending the merger to shareholders. Under its terms both companies will become subsidiaries of SmithKline Beecham. The transaction will be implemented through an exchange of securities without additional share capital being raised. Holders of Beecham 25p ordinary shares will receive

0.8784 A shares of 25p in SmithKline Beecham, plus £1.75 floating rate unsecured loan stock 1990/92 of the new company.

SmithKline Beecham will be organised into two operating groups: pharmaceuticals, and healthcare products and services (which will include OTC medicines, animal health and health related consumer products). Both companies have agreed with immediate effect to co-promote their prescription brands, which include Tagamet, Ridaura, Monocid, Augmentin and Reliflex. Beecham has also been granted a licence to sell cimetidine under Beecham brand names.

The board of the new company will comprise 18 directors coming equally from both companies. Beecham executives joining the board include James Andress (chairman SmithKline Beecham Healthcare Products and Services), Hugh Collum (group finance director), Peter Jackson (group personnel director), John Hunter (chairman SmithKline Beecham Consumer Products), and Dr Keith Mansford (chairman research and development). The Group headquarters is to be based in London. SmithKline's headquarters in Philadelphia will become the principal centre for ethical, pharmaceutical, animal health and clinical laboratory business.

### BRIEFS

**Napp Laboratories** have changed their telephone number to 0223 424444. For a limited period, any call to the old number will be automatically forwarded to the new one.

**Park Systems** have available free of charge a video of their new patient medication record labelling system. Park stress that they are still providing a full demonstration or trial of the system. The video expands on features in their brochure. For details phone Park Systems on 051-298 2233.

**Fairscan Ltd** have moved to 14A High Street, Lyndhurst, Hampshire SO43 7BD. Tel: 042-128-3222.

**Macarthy Ltd** have acquired a further two pharmacies to add to their chain of 175 shops. This furthers their intended aim to concentrate on retailing, following the sale of their manufacturing division (*C&D* January 21, p109). The pharmacies at Broughton Ferry, Dundee and Kinghorn, Fife and were purchased for £176,000 plus stock at valuation.

## Report considers the 'generic dent'

SmithKline, ICI and Syntex are all said to be highly vulnerable to generic competition, according to a report published this week.

The Economic Advisory Group say in "Generic pharmaceuticals — the threat" that a further 11 companies are just "vulnerable" and seven more "slightly vulnerable". Their report considers competition in the short term (up to 1991) or in the long term (1991-96).

A total of 35 companies are profiled in the report. A company's vulnerability is based on a "detailed analysis of 600 leading drugs".

SmithKline are described as getting most of their pharmaceutical income from Dyazide and Tagamet. The former "faces generic competition" and Tagamet is up against technical competition and a patent expiry in the early nineties.

Syntex's Naproxen will be out of patent in 1993, making the company vulnerable in the middle term as they are "highly dependent" on it.

ICI's main product Tenormin is still under patent but there is a licence of right in the UK. Nolvadex is recently out of patent and Inderal is available as a generic. The report says much depends on Corwin, a possible competitor for cardiac glycosides.

Those who escape any mention of vulnerability include Johnson & Johnson, Bristol-Myers, Wellcome, Warner-Lambert, Merck and Schering-Plough.

The report is available, priced £950, from *Janice Haigh*. Tel: 01 629 7209.

**E.R. Squibb** have announced the launch of Princeton Pharmaceutical Products. The formation of the new company reflects their current growth in the UK, and has become necessary to handle an expanding product range.

# Reckitt's tight ship: profits up 14pc

Reckitt & Colman plc are reporting pre-tax profits up 14 per cent to £191.3m in full year results issued last week.

Turnover is down 6.6 per cent to £1.39bn, reflecting a programme of 1988 disposals. Chairman Sir Michael Colman says: "It was another successful year for us and the underlying rate of sales growth was 7 per cent."

Currency movements took about £70m off turnover and £7m off pre-tax profits on translation into sterling. He said the company has concentrated on core brands in selected geographical areas, particularly Europe and the US and the results show the beneficial outcome. Trading profits are up 9.9 per cent to £197.86m. Interest charges have been

lowered and the group's effective tax rate reduced, he said.

Pharmaceutical sales are up 10.2 per cent to £148m and pre-tax profits by 16 per cent to £30.3m. The division now contributes 15.7 per cent of group pre-tax profit.

The chairman said the UK performance was "excellent" with OTC brands prospering. Lemsip cold relief and Junior Disprol made good progress on from their 1987 launches and the Haliborange range, acquired from Evans last April, has "significantly exceeded expectations".

Gaviscon's performance on the prescriptions side was also noted which together with Fybogel, achieved record gains, he said.

# IN THE CITY

An institutional mountain of cash has continued to underpin the level of the UK stock market, but the severity and shape of Mr Lawson's eventual economic slowdown is proving a source of concern after inflation and balance of payments statistics last week confirmed the market's worse fears.

Smith & Nephew caused a stir at the beginning of this week after a large line of stock — 9.5 million shares — was placed in the market at a slight discount to its 139p share price. The placing appears to have been of stock issued to the vendors of Ioptex, a US manufacturer of eye implants which Smith & Nephew acquired last December.

The unknown identity of the buyer of the stock, equivalent to 1 per cent of the group, has led to speculation of a possible bid. It recently produced final results much in line with expectations. Profits were ahead 13 per cent to £124.2m and earnings per share up 11 per cent at 9.1p.

However, the big event of the month in the health and household sector was Beecham's announcement that it has concluded merger discussions with SmithKline of the US, ending months of speculation that such a deal was in the offing.

Two views seem to be developing. On the one hand the complementary product portfolios and the critical mass a SmithKline takeover would give Beecham in a number of markets, together with the creation of a first class research and development effort, is seen as a quantum leap forward for its pharmaceutical business.

Pessimists, however, are concerned about the approaching expiry in 1993 of the US patent for SmithKline's Tagamet, with sales worth \$500m. Competition will emerge on day one and it seems reasonable to expect the loss of at least one third of sales within a year of the patent's expiry.

Glaxo's interim results, which showed robust sales growth of Zantac confounded those who persistently forecast a slowdown, and led stockbrokers BZW to increase its full year profits forecast to £973m. Meanwhile Reckitt & Colman's winning formula of expansion through margin enhancement shone through its 1988 results (above).

## COMING EVENTS

### PATA AGM

The 93rd annual meeting of the Proprietary Articles Trade Association will be held on May 16 at The Marlborough Hotel, Bloomsbury Street, London, WC1B 3QD, at 2pm. The meeting is open to members of all sections of the association.

### CPP to study questions

The College of Pharmacy Practice is holding a seminar on "Questionnaire design" at Bell House, 111 Lambeth Road, SE1, on April 26 at 2pm. It is the fifth seminar in the "Researchers' toolbox" series, and is aimed primarily at those pharmacists interested in carrying out their own research.

The seminar will be conducted by Martin Collins, Professor of Marketing Research at City University's Business School. The fee is £15 for College members, and £20 for non-members. Further details from Alison Oliver. Tel: 01 735 0418.

#### Monday, April 17

**Hull Pharmacist' Association**  
Post Graduate Centre, Hull Royal Infirmary, Anlaby Road, Hull. at 8pm. Annual meeting.

**Mid Glamorgan East Branch, RPSGB** Globe Hotel, Pontypridd, at 8pm. "Management of psychiatric patients in hospitals and in the community", by Dr David Martin Jenkins. Buffet.

**West Metropolitan Branch, RPSGB** Institute lecture theatre, The Brompton Hospital, Fulham Road, at 6.45pm. "Herbal medicines in the United Kingdom and the European community", Dr L.A. Anderson. Joint meeting with West London Branch of the National Pharmaceutical Association. Refreshments available.

#### Tuesday, April 18

**Edinburgh Branch, RPSGB** Annual meeting and visit to the pharmacy department of Edinburgh Royal Infirmary.

**Northumbrian Branch, RPSGB** Buffet at 7.30pm followed by Annual meeting. Speaker Colin Hitchins treasurer, RPSGB, Boots Chemicals, Cramlington.

#### Wednesday, April 19

**Wirral Branch, RPSGB** Wirral Postgraduate Medical Centre, Clatterbridge Hospital, at 8pm. Annual meeting.

**Wembley Branch, RPSGB** Century Hotel, Forty Avenue, Wembley, at 7.30pm. Annual meeting followed by wine tasting.

#### Thursday, April 20

**Bedfordshire Branch, RPSGB**. Coach and Horses, Barton le Clay, at 8pm. Annual meeting.

**Dundee Branch, RPSGB**. Lecture theatre 3, Ninewells Medical School,

at 7.45pm. Annual meeting, followed by a visit to the Area Pharmaceutical Laboratories, Ninewells Hospital.

**Northern Scottish Branch, RPSGB** Post Graduate Centre, Raigmore Hospital, Inverness, at 7.45pm. Annual meeting.

**Weald of Kent Branch, RPSGB** Postgraduate Centre, Kent & Sussex Hospital, Tunbridge Wells, at 7.45pm. Annual meeting. Mr C. Woolford, the Society's director of public relations on his work promoting the profession's image and reputation.

#### Advance information

**Sterile processing in the pharmaceutical industry** School of Pharmacy, University of London Brunswick Square, WC1, April 17-22. Details from Dr R.J. Pinney on 01-837 7651.

**Society of Cosmetic Scientists** Northern Lecture — "New direction in the psychology of cosmetics and fragrance", by Dr Jean Ann Graham (consultant), at Blossoms Hotel Chester, May 4 at 7pm. Refreshments from 6.30pm.

**Industrial Pharmacists Group** RPSGB. Annual meeting at 1 Lambeth High Street, SE1, May 12, at 10am. Followed by a Group meeting on "Pharmaceutical patents", chaired by Dr B. Hunter of IC Pharmaceuticals. Registration fee includes lunch and coffee/tea; Group members, RPSGB members and pre-registration students £20 and non-members £40. Forms from Mr R.E. Marshall on 01-735 9141 ext 289.

**Society of Cosmetic Scientists** One day symposium on "Natural ingredients — fact or fiction?", at Park Lane Hotel, Piccadilly, London W1 May 23. Details from the general secretary on 0582 26661.

**Cosmetic Toiletry and Perfumer Association** is supporting a seminar at the Queen Elizabeth II Conference Centre, Westminster, London, May 24. "Body images and business opportunities in Japan". £100 including lunch and wine. Details from Opportunity Japan Campaign, Room 351, Department of Trade and Industry, Victoria Street, London SW1.

**Pharmaceutical stability principles and expiration dating** A two-day course at the Hotel International in Basel, Switzerland, on May 25-26. Course instructor Dr J.T. Carstensen, who has worked in product development and direct line production for 17 years. Further information from the seminar's sponsor Technomic Publishing AG, on 061-23 7011.

**Royal Society of Medicine Library and Scientific Research section**, "Medicines monitoring in 1992", at the Royal Society of Medicine, 1 Wimpole Street, London W1, May 25 at 5pm.

**Phytolia** "The second medicinal aromatic and industrial plant's international open days for professionals". Exhibition at Chemille, Anjou, France, May 25-28. Details from Cabinet MDC on (33) 47 87 00 32.

**Centre for Medicines Research** Lecture and dinner. "The perception and management of therapeutic risk" by Professor Paul Slovic, at the Royal College of Physicians, 11 St Andrews Place, Regent's Park, London, NW1 June 14, at 6pm. Tickets for the lecture (free) and the dinner (£40) from Marie Maynard CMR on 01-643 8000.

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# ABOUT PEOPLE

## Cash call for the Park

Park Pharmacy Trust are in urgent need of cash to keep their historic exhibition of the Victorian C.J. Park pharmacy in Plymouth's Merchant House museum.

Curator Dr Robert Knight says the Trust is looking for £5,000 a year to keep the pharmacy open and pay one member of staff to look after all aspects of the Trust's work.

At present the pharmacy and the Trust's other historic pharmacy Balkwill, late Bevan & Cookworthy in the Cookworthy Museum, Kingsbridge, is manned by 25 volunteers. But the Trust also has headquarters in Thorn Park Lodge in Plymouth, where it is developing a medicinal garden, houses a 1,000 volume library, including a 100-year run of prescription books from the C.J. Park pharmacy.

"The time has come for a new agreement between the city council and the Trust," says Dr Knight. "In the first three years, we didn't ask for any money because of the community programme which gave us money to cover our expenses. Now there is no community programme and it is fundamental that you pay volunteers expenses."

Dr Knight says the important thing about the exhibit in the Merchant House is that it is always manned, so that visitors can share their reminiscences about pharmacies of the past, as well as experience pill rolling and powder envelope folding and the like at first hand. "We don't want to turn it into a souvenir shop because that would spoil the look of it," Dr Knight says, and sponsorship would obviously fill a gap should the City Council not come up with the goods. All offers will be gratefully received.

One added incentive for the Trust is a nomination to the final six in a competition for voluntary organisations being run in conjunction with a BBC series "It's My City!" this June.



*The new executive of the British Pharmaceutical Students Association: Standing (l to r) Emily Wilson, secretary general; Gianpiero Celino, northern area co-ordinator; Max Kirkby, treasurer; Raj Gokani, sports officer; George Thornton, MPS, skiing officer; David Kennedy, international liaison secretary; Nicolas Gray, joint Pennine area co-ordinator. Seated (l to r): Jenny Orford, eastern area co-ordinator; Susan Hay, student exchange officer; Lesley Beattie, public relations officer; Tee Treacy, president; Hillary Harper, preregistration officer; Karen Harry, joint pennine area co-ordinator and Julia Harrison, western area co-ordinator*



*An intrepid team of high flying parachute jumpers representing AAH Pharmaceuticals' West Lane, Runcorn HQ has raised £1,000 for a guide dog for the blind. "Buster" was named by Runcorn employee, Pat Bunn, in an in-house competition. Ina Wright (bottom left) — from the Guide Dog for the Blind appeal, receives the fund-raisers' cheque from Stan Dobson, AAH Pharmaceuticals personnel manager*

## Canoe race raises funds

Pharmacist John Powell and his crew-mate school teacher Georg Marsden completed the Devizes to Westminster annual canoe race in their own best time of 49hr 49mins.

Their combined age of 15 years was an all-time record for this race which attracted some 100 worldwide entries.

John and George paddle their canoe in the aid of the Royal Commonwealth Society of the Blind — donations to 8 Henry Avenue, Woodford Green, Essex, IG8 9RA.

## APPOINTMENTS

**Nicholas Laboratories Ltd** have appointed Katherine Rose and Alex John as assistant product managers in their healthcare division.

**Kodak Ltd** have appointed Paul Turner manager of marketing planning for the professional photography division.

**Cussons (UK) Ltd** have appointed Andrew Gibson as national field sales manager.

**Cussons (UK) Ltd** have appointed Mike Fallon and Sidney Jones as national account controllers. Mike Eardley as trade planning controller and Ian Wolstencroft as field sales manager.

**The Association of the British Pharmaceutical Industry** have appointed Mrs France Charlesworth director of ABPI European and international affairs.

**Blue Ridge Care Ltd** have appointed Douglas Stevens as operations director.

**English Grains** have appointed Andrew Gibson as national field sales manager.

**Reckitt & Colman Products Ltd** have announced the retirement of Mr T.J.A. Colman and Mr S.M. Peretz, MBE, FRPharmS, who were appointed non-executive directors in 1978 and 1979 respectively.

## Fenton-May is in again

Principal quality control pharmacist V'Iain Fenton-May has been re-elected president of the Guild of Hospital Pharmacists to serve a second year.

The Guild presents a broadly similar face for the coming year. John Gilby of the City Hospital, Nottingham has been re-elected vice-president and Aberdeen's Arthur Williams continues as professional secretary and chairman of the Practice Committee.

Chairman of Pharmaceutical Whitley Council staff side will again be Central Notts and Bassetlaw district pharmaceutical officer Bob Timson and Crewe DPhO Bill Brookes continues as editor.

Overall there are only two changes on Council: Don Page was elected as national member along with Paul Gurnell, Paul Sandham, Mr Timson and Mr Williams, and Mrs Elizabeth Sadler joins Guild Council as district member for Wessex and Oxford.

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